

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

EARN INTERNATIONAL UNION OF OPERATING ENGINEERS

ADDRESS (number and street)

1125 17TH ST NW

Check if different
than previously
reported. (ACC)

WASHINGTON

DC

20036

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00624817

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☒ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

DC

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

HICKEY, BRIAN, E, Mr.,

Type or Print Name of Treasurer

Signature of Treasurer

HICKEY, BRIAN, E, Mr.,

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

EARN INTERNATIONAL UNION OF OPERATING ENGINEERS

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
10 / 20 / 2016 To: M M / D D / Y Y Y Y Y Y
11 / 28 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2016		0.00
(b) Cash on Hand at Beginning of Reporting Period.....	2980.00	
(c) Total Receipts (from Line 19)	522318.24	2308985.24
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	525298.24	2308985.24
7. Total Disbursements (from Line 31).....	519689.36	2303376.36
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	5608.88	5608.88
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	308246.74	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

EARN INTERNATIONAL UNION OF OPERATING ENGINEERS

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	0		2	0	1	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	8		2	0	1	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	522318.24	2308985.24
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	522318.24	2308985.24
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	522318.24	2308985.24
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	522318.24	2308985.24
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	522318.24	2308985.24

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	59137.62	59137.62
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	59137.62	59137.62
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	190000.00	1973687.00
24. Independent Expenditures (use Schedule E)	268559.87	268559.87
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	1991.87	1991.87
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	519689.36	2303376.36
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	519689.36	2303376.36

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	522318.24	2308985.24
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	522318.24	2308985.24
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	59137.62	59137.62
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	59137.62	59137.62

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 139

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

EARN INTERNATIONAL UNION OF OPERATING ENGINEERS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. INTERNATIONAL UNION OF OPERATING ENGINEERS

Mailing Address 1125 17TH ST NW

City
WASHINGTON

State
DC

Zip Code
20036

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1839972.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 27 / 2016

Transaction ID : SA11AI.4941

Amount of Each Receipt this Period

53305.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. INTERNATIONAL UNION OF OPERATING ENGINEERS

Mailing Address 1125 17TH ST NW

City
WASHINGTON

State
DC

Zip Code
20036

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2029972.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 27 / 2016

Transaction ID : SA11AI.4942

Amount of Each Receipt this Period

190000.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. INTERNATIONAL UNION OF OPERATING ENGINEERS

Mailing Address 1125 17TH ST NW

City
WASHINGTON

State
DC

Zip Code
20036

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2091346.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 28 / 2016

Transaction ID : SA11AI.4943

Amount of Each Receipt this Period

61374.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

304679.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 139

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EARN INTERNATIONAL UNION OF OPERATING ENGINEERS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. INTERNATIONAL UNION OF OPERATING ENGINEERS

Mailing Address 1125 17TH ST NW

City
WASHINGTON

State
DC

Zip Code
20036

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2196985.24

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 28 / 2016

Transaction ID : SA11AI.4944

Amount of Each Receipt this Period

105639.24

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. INTERNATIONAL UNION OF OPERATING ENGINEERS

Mailing Address 1125 17TH ST NW

City
WASHINGTON

State
DC

Zip Code
20036

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2296985.24

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 04 / 2016

Transaction ID : SA11AI.4970

Amount of Each Receipt this Period

100000.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. INTERNATIONAL UNION OF OPERATING ENGINEERS

Mailing Address 1125 17TH ST NW

City
WASHINGTON

State
DC

Zip Code
20036

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2308985.24

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 21 / 2016

Transaction ID : SA11AI.4971

Amount of Each Receipt this Period

12000.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

217639.24

TOTAL This Period (last page this line number only)..... ►

522318.24

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

EARN INTERNATIONAL UNION OF OPERATING ENGINEERS

Full Name (Last, First, Middle Initial)

A. CONCORD MARKETING SOLUTIONS

Mailing Address 195 EXCHANGE BLVD

City
GLENDALE HEIGHTSState
ILZip Code
60139Purpose of Disbursement
Shirts, Hats for Canvassing Staff

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			04			2016			

FEC Identification Number

C

Transaction ID : SB21B.4969

Amount of Each Disbursement this Period

6440.17

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. LANDMARK STRATEGIES

Mailing Address 8741 CENTER RD

City
SPRINGFIELDState
VAZip Code
22152Purpose of Disbursement
Live Calls

004

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			04			2016			

FEC Identification Number

C

Transaction ID : SB21B.4960

Amount of Each Disbursement this Period

13940.91

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. LANDMARK STRATEGIES

Mailing Address 8741 CENTER RD

City
SPRINGFIELDState
VAZip Code
22152Purpose of Disbursement
Live Calls

004

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			04			2016			

FEC Identification Number

C

Transaction ID : SB21B.4961

Amount of Each Disbursement this Period

9902.87

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

30283.95

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

EARN INTERNATIONAL UNION OF OPERATING ENGINEERS

Full Name (Last, First, Middle Initial)

A. LANDMARK STRATEGIES

Mailing Address 8741 CENTER RD

City
SPRINGFIELDState
VAZip Code
22152Purpose of Disbursement
Live Calls

004

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	1		0	9		2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.4965

Amount of Each Disbursement this Period

4818.16

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. VAROGA & ASSOCIATESMailing Address 2126 CONNECTICUT AVENUE NW
SUITE 72City
WASHINGTONState
DCZip Code
20008Purpose of Disbursement
Consulting Expenses

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	1		0	4		2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.4963

Amount of Each Disbursement this Period

24000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

28818.16

TOTAL This Period (last page this line number only).....▶

59102.11

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

EARN INTERNATIONAL UNION OF OPERATING ENGINEERS

Full Name (Last, First, Middle Initial)

A. AMERICA VOTES ACTION FUND

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		27		2016

Mailing Address 1155 CONNECTICUT AVENUE, NW
SUITE 600City
WASHINGTONState
DCZip Code
20036Purpose of Disbursement
DONATION

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C C00492520**Transaction ID : SB23.4729**

Amount of Each Disbursement this Period

25000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. HOUSE MAJORITY PAC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		27		2016

Mailing Address 700 13TH ST NW
SUITE 600City
WASHINGTONState
DCZip Code
20005Purpose of Disbursement
DONATION

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C C00495028**Transaction ID : SB23.4731**

Amount of Each Disbursement this Period

50000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. LIFT LEADING ILLINOIS FOR TOMORROW

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		27		2016

Mailing Address 3255 CENTRAL ST

City
EVANSTONState
ILZip Code
60201Purpose of Disbursement
DONATION

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C C00625525**Transaction ID : SB23.4734**

Amount of Each Disbursement this Period

100000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

175000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

EARN INTERNATIONAL UNION OF OPERATING ENGINEERS

Full Name (Last, First, Middle Initial)

A. PROGRESS UNITED PAC

Mailing Address 2308 MT VERNON AVENUE SUITE 222

City
ALEXANDRIAState
VAZip Code
22301Purpose of Disbursement
DONATION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
10		27		2016

FEC Identification Number

C C00616730**Transaction ID : SB23.4736**

Amount of Each Disbursement this Period

15000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
-----	---	-----	---	-------------

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
-----	---	-----	---	-------------

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

15000.00

190000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 12 OF 139

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

EARN INTERNATIONAL UNION OF OPERATING ENGINEERS

Full Name (Last, First, Middle Initial)

A. INTERNATIONAL UNION OF OPERATING ENGINEERS

Mailing Address 1125 17TH ST NW

City
WASHINGTONState
DCZip Code
20036Purpose of Disbursement
Canvassing Salary & Benefits

001

Category/
Type

Candidate Name

VAN OSTERN, COLIN, , Mr.,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2016

FEC Identification Number

C

Transaction ID : SB29.4620

Amount of Each Disbursement this Period

189.66

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. INTERNATIONAL UNION OF OPERATING ENGINEERS

Mailing Address 1125 17TH ST NW

City
WASHINGTONState
DCZip Code
20036Purpose of Disbursement
Canvassing Salary & Benefits

001

Category/
Type

Candidate Name

VAN OSTERN, COLIN, , Mr.,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

FEC Identification Number

C

Transaction ID : SB29.4656

Amount of Each Disbursement this Period

209.93

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. INTERNATIONAL UNION OF OPERATING ENGINEERS

Mailing Address 1125 17TH ST NW

City
WASHINGTONState
DCZip Code
20036Purpose of Disbursement
Canvassing Salary & Benefits

001

Category/
Type

Candidate Name

WOODHOUSE, JOYCE, , ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

FEC Identification Number

C

Transaction ID : SB29.4657

Amount of Each Disbursement this Period

1264.87

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 OF 139

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

EARN INTERNATIONAL UNION OF OPERATING ENGINEERS

Full Name (Last, First, Middle Initial)

A. INTERNATIONAL UNION OF OPERATING ENGINEERS

Mailing Address 1125 17TH ST NW

City
WASHINGTONState
DCZip Code
20036Purpose of Disbursement
Canvassing Salary & Benefits

001

Category/
Type

Candidate Name

FUMO, OZZIE, , ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	5			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4660

Amount of Each Disbursement this Period

1264.87

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. INTERNATIONAL UNION OF OPERATING ENGINEERS

Mailing Address 1125 17TH ST NW

City
WASHINGTONState
DCZip Code
20036Purpose of Disbursement
Canvassing Salary & Benefits

001

Category/
Type

Candidate Name

VAN OSTERN, COLIN, , Mr.,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	6			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4664

Amount of Each Disbursement this Period

272.71

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. INTERNATIONAL UNION OF OPERATING ENGINEERS

Mailing Address 1125 17TH ST NW

City
WASHINGTONState
DCZip Code
20036Purpose of Disbursement
Canvassing Salary & Benefits

001

Category/
Type

Candidate Name

WOODHOUSE, JOYCE, , ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	6			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4665

Amount of Each Disbursement this Period

1264.87

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 139

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

EARN INTERNATIONAL UNION OF OPERATING ENGINEERS

Full Name (Last, First, Middle Initial)

A. INTERNATIONAL UNION OF OPERATING ENGINEERS

Mailing Address 1125 17TH ST NW

City
WASHINGTONState
DCZip Code
20036Purpose of Disbursement
Canvassing Salary & Benefits

001

Candidate Name

FUMO, OZZIE, , ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	6			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4666

Amount of Each Disbursement this Period

1264.87

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. INTERNATIONAL UNION OF OPERATING ENGINEERS

Mailing Address 1125 17TH ST NW

City
WASHINGTONState
DCZip Code
20036Purpose of Disbursement
Canvassing Salary & Benefits

001

Candidate Name

WOODHOUSE, JOYCE, , ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	7			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4675

Amount of Each Disbursement this Period

1264.87

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. INTERNATIONAL UNION OF OPERATING ENGINEERS

Mailing Address 1125 17TH ST NW

City
WASHINGTONState
DCZip Code
20036Purpose of Disbursement
Canvassing Salary & Benefits

001

Candidate Name

FUMO, OZZIE, , ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	7			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4676

Amount of Each Disbursement this Period

1264.87

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 15 OF 139

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

EARN INTERNATIONAL UNION OF OPERATING ENGINEERS

Full Name (Last, First, Middle Initial)

A. INTERNATIONAL UNION OF OPERATING ENGINEERS

Mailing Address 1125 17TH ST NW

City
WASHINGTONState
DCZip Code
20036Purpose of Disbursement
Canvassing Salary & Benefits

001

Category/
Type

Candidate Name

VAN OSTERN, COLIN, , Mr.,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	7			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4677

Amount of Each Disbursement this Period

272.71

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. INTERNATIONAL UNION OF OPERATING ENGINEERS

Mailing Address 1125 17TH ST NW

City
WASHINGTONState
DCZip Code
20036Purpose of Disbursement
Canvassing Salary & Benefits

001

Category/
Type

Candidate Name

VAN OSTERN, COLIN, , Mr.,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	8			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4788

Amount of Each Disbursement this Period

207.73

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. INTERNATIONAL UNION OF OPERATING ENGINEERS

Mailing Address 1125 17TH ST NW

City
WASHINGTONState
DCZip Code
20036Purpose of Disbursement
Canvassing Salaries & Benefits

001

Category/
Type

Candidate Name

VAN OSTERN, COLIN, , Mr.,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	8			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4951

Amount of Each Disbursement this Period

1259.58

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

1259.58

TOTAL This Period (last page this line number only)..... ►

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 16 OF 139

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

EARN INTERNATIONAL UNION OF OPERATING ENGINEERS

Full Name (Last, First, Middle Initial)

A. INTERNATIONAL UNION OF OPERATING ENGINEERS

Mailing Address 1125 17TH ST NW

City
WASHINGTONState
DCZip Code
20036Purpose of Disbursement
Canvassing Salary & Benefits

001

Category/
Type

Candidate Name

VAN OSTERN, COLIN, , Mr.,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				29				2016					

FEC Identification Number

C

Transaction ID : SB29.4790

Amount of Each Disbursement this Period

207.73

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. INTERNATIONAL UNION OF OPERATING ENGINEERS

Mailing Address 1125 17TH ST NW

City
WASHINGTONState
DCZip Code
20036Purpose of Disbursement
Canvassing Salary & Benefits

001

Category/
Type

Candidate Name

VAN OSTERN, COLIN, , Mr.,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				31				2016					

FEC Identification Number

C

Transaction ID : SB29.4909

Amount of Each Disbursement this Period

239.57

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. INTERNATIONAL UNION OF OPERATING ENGINEERS

Mailing Address 1125 17TH ST NW

City
WASHINGTONState
DCZip Code
20036Purpose of Disbursement
Canvassing Salary & Benefits

001

Category/
Type

Candidate Name

CANIZZARO, NICOLE, , ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				31				2016					

FEC Identification Number

C

Transaction ID : SB29.4912

Amount of Each Disbursement this Period

2945.15

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 17 OF 139

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

EARN INTERNATIONAL UNION OF OPERATING ENGINEERS

Full Name (Last, First, Middle Initial)

A. INTERNATIONAL UNION OF OPERATING ENGINEERS

Mailing Address 1125 17TH ST NW

City
WASHINGTONState
DCZip Code
20036Purpose of Disbursement
Canvassing Salary & Benefits

001

Category/
Type

Candidate Name

VAN OSTERN, COLIN, , Mr.,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	1			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4913

Amount of Each Disbursement this Period

239.57

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. INTERNATIONAL UNION OF OPERATING ENGINEERS

Mailing Address 1125 17TH ST NW

City
WASHINGTONState
DCZip Code
20036Purpose of Disbursement
Canvassing Salary & Benefits

001

Category/
Type

Candidate Name

VAN OSTERN, COLIN, , Mr.,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	2			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4914

Amount of Each Disbursement this Period

272.71

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Door Hangers

004

Category/
Type

Candidate Name

VAN OSTERN, COLIN, , Mr.,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	0			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4622

Amount of Each Disbursement this Period

17.74

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 18 OF 139

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

EARN INTERNATIONAL UNION OF OPERATING ENGINEERS

Full Name (Last, First, Middle Initial)

A. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Door Hangers

004

Candidate Name

WOODHOUSE, JOYCE, , ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	0			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4624

Amount of Each Disbursement this Period

82.26

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Door Hangers

004

Candidate Name

CANIZZARO, NICOLE, , ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	0			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4625

Amount of Each Disbursement this Period

64.56

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Door Hangers

004

Candidate Name

FUMO, OZZIE, , ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	0			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4628

Amount of Each Disbursement this Period

35.51

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 19 OF 139

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

EARN INTERNATIONAL UNION OF OPERATING ENGINEERS

Full Name (Last, First, Middle Initial)

A. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Door Hangers

004

Candidate Name

COHEN, LESLEY, , ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	0			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4629

Amount of Each Disbursement this Period

38.74

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Postage/Production Mailings

004

Candidate Name

VAN OSTERN, COLIN, , Mr.,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	0			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4806

Amount of Each Disbursement this Period

455.48

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Door Hangers

004

Candidate Name

VAN OSTERN, COLIN, , Mr.,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	1			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4630

Amount of Each Disbursement this Period

17.74

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 20 OF 139

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

EARN INTERNATIONAL UNION OF OPERATING ENGINEERS

Full Name (Last, First, Middle Initial)

A. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Door Hangers

004

Candidate Name

FUMO, OZZIE, , ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	1			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4631

Amount of Each Disbursement this Period

35.51

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Door Hangers

004

Candidate Name

COHEN, LESLEY, , ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	1			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4632

Amount of Each Disbursement this Period

38.74

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Door Hangers

004

Candidate Name

CANIZZARO, NICOLE, , ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	1			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4633

Amount of Each Disbursement this Period

64.56

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 21 OF 139

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

EARN INTERNATIONAL UNION OF OPERATING ENGINEERS

Full Name (Last, First, Middle Initial)

A. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Door Hangers

004

Candidate Name

WOODHOUSE, JOYCE, , ,

Office Sought:

☐ House☐ Senate☐ President

Disbursement For: 2016

☐ Primary☒ General☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	1			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4634

Amount of Each Disbursement this Period

82.26

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Door Hangers

004

Candidate Name

VAN OSTERN, COLIN, , Mr.,

Office Sought:

☐ House☐ Senate☐ President

Disbursement For: 2016

☐ Primary☒ General☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	4			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4635

Amount of Each Disbursement this Period

17.74

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Door Hangers

004

Candidate Name

FUMO, OZZIE, , ,

Office Sought:

☐ House☐ Senate☐ President

Disbursement For: 2016

☐ Primary☒ General☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	4			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4636

Amount of Each Disbursement this Period

35.51

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 22 OF 139

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

EARN INTERNATIONAL UNION OF OPERATING ENGINEERS

Full Name (Last, First, Middle Initial)

A. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Door Hangers

004

Candidate Name

COHEN, LESLEY, , ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	4			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4637

Amount of Each Disbursement this Period

38.74

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Door Hangers

004

Candidate Name

CANIZZARO, NICOLE, , ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	4			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4638

Amount of Each Disbursement this Period

64.56

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Door Hangers

004

Candidate Name

WOODHOUSE, JOYCE, , ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	4			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4639

Amount of Each Disbursement this Period

82.26

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 23 OF 139

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

EARN INTERNATIONAL UNION OF OPERATING ENGINEERS

Full Name (Last, First, Middle Initial)

A. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Door Hangers

004

Candidate Name

VAN OSTERN, COLIN, , Mr.,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0				2	5		2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4640

Amount of Each Disbursement this Period

17.74

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Door Hangers

004

Candidate Name

FUMO, OZZIE, , ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0				2	5		2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4641

Amount of Each Disbursement this Period

35.51

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Door Hangers

004

Candidate Name

COHEN, LESLEY, , ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0				2	5		2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4642

Amount of Each Disbursement this Period

38.74

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 24 OF 139

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

EARN INTERNATIONAL UNION OF OPERATING ENGINEERS

Full Name (Last, First, Middle Initial)

A. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Door Hangers

004

Candidate Name

CANIZZARO, NICOLE, , ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0				2	5		2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4643

Amount of Each Disbursement this Period

64.56

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Door Hangers

004

Candidate Name

WOODHOUSE, JOYCE, , ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0				2	5		2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4644

Amount of Each Disbursement this Period

82.26

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Postage/Production Mailings

004

Candidate Name

VAN OSTERN, COLIN, , Mr.,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0				2	5		2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4807

Amount of Each Disbursement this Period

455.48

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 25 OF 139

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

EARN INTERNATIONAL UNION OF OPERATING ENGINEERS

Full Name (Last, First, Middle Initial)

A. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Door Hangers

004

Candidate Name

VAN OSTERN, COLIN, , Mr.,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	6			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4645

Amount of Each Disbursement this Period

17.74

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Door Hangers

004

Candidate Name

FUMO, OZZIE, , ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	6			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4646

Amount of Each Disbursement this Period

35.51

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Door Hangers

004

Candidate Name

COHEN, LESLEY, , ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	6			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4647

Amount of Each Disbursement this Period

38.74

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 26 OF 139

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

EARN INTERNATIONAL UNION OF OPERATING ENGINEERS

Full Name (Last, First, Middle Initial)

A. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Door Hangers

004

Candidate Name

CANIZZARO, NICOLE, , ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	6			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4648

Amount of Each Disbursement this Period

64.56

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Door Hangers

004

Candidate Name

WOODHOUSE, JOYCE, , ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	6			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4649

Amount of Each Disbursement this Period

82.26

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Door Hangers

004

Candidate Name

VAN OSTERN, COLIN, , Mr.,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	7			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4680

Amount of Each Disbursement this Period

17.74

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 27 OF 139

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

EARN INTERNATIONAL UNION OF OPERATING ENGINEERS

Full Name (Last, First, Middle Initial)

A. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Door Hangers

004

Candidate Name

FUMO, OZZIE, , ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	7			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4711

Amount of Each Disbursement this Period

35.51

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Door Hangers

004

Candidate Name

COHEN, LESLEY, , ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	7			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4712

Amount of Each Disbursement this Period

38.74

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Door Hangers

004

Candidate Name

CANIZZARO, NICOLE, , ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	7			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4713

Amount of Each Disbursement this Period

64.56

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 28 OF 139

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

EARN INTERNATIONAL UNION OF OPERATING ENGINEERS

Full Name (Last, First, Middle Initial)

A. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Door Hangers

004

Candidate Name

WOODHOUSE, JOYCE, , ,

Office Sought:

☐ House☐ Senate☐ President

Disbursement For: 2016

☐ Primary☒ General☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	7			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4714

Amount of Each Disbursement this Period

82.26

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
POSTAGE

004

Candidate Name

VAN OSTERN, COLIN, , Mr.,

Office Sought:

☐ House☐ Senate☐ President

Disbursement For: 2016

☐ Primary☒ General☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	7			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4741

Amount of Each Disbursement this Period

732.29

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Door Hangers

004

Candidate Name

VAN OSTERN, COLIN, , Mr.,

Office Sought:

☐ House☐ Senate☐ President

Disbursement For: 2016

☐ Primary☒ General☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	8			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4709

Amount of Each Disbursement this Period

17.74

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

732.29

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 29 OF 139

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

EARN INTERNATIONAL UNION OF OPERATING ENGINEERS

Full Name (Last, First, Middle Initial)

A. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Door Hangers

004

Candidate Name

FUMO, OZZIE, , ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	8			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4719

Amount of Each Disbursement this Period

35.51

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Door Hangers

004

Candidate Name

COHEN, LESLEY, , ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	8			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4720

Amount of Each Disbursement this Period

38.74

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Door Hangers

004

Candidate Name

CANIZZARO, NICOLE, , ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	8			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4721

Amount of Each Disbursement this Period

64.56

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 30 OF 139

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

EARN INTERNATIONAL UNION OF OPERATING ENGINEERS

Full Name (Last, First, Middle Initial)

A. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Door Hangers

004

Category/
Type

Candidate Name

WOODHOUSE, JOYCE, , ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			28			2016					

FEC Identification Number

C

Transaction ID : SB29.4722

Amount of Each Disbursement this Period

82.26

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Production Mailings

004

Category/
Type

Candidate Name

VAN OSTERN, COLIN, , Mr.,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			28			2016					

FEC Identification Number

C

Transaction ID : SB29.4808

Amount of Each Disbursement this Period

211.38

☒ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

TOTAL This Period (last page this line number only).....▶

1991.87

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 31 OF 139

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

EARN INTERNATIONAL UNION OF OPERATING ENGINEERS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ADELSTEIN & ASSOCIATES LLC

Nature of Debt (Purpose):

Video shoot

Mailing Address 222 W ONTARIO ST
SUITE 600City
CHICAGOState
ILZip Code
60654

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4981

Amount Incurred This Period

3746.86

Payment This Period

0.00

Outstanding Balance at Close of This Period

3746.86

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

INTERNATIONAL UNION OF OPERATING ENGINEERS

Nature of Debt (Purpose):

Canvassing Salary & Benefits

Mailing Address 1125 17TH ST NW

City
WASHINGTONState
DCZip Code
20036

Outstanding Balance Beginning This Period

105639.24

Transaction ID : SD10.4541

Amount Incurred This Period

0.00

Payment This Period

105639.24

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

INTERNATIONAL UNION OF OPERATING ENGINEERS

Nature of Debt (Purpose):

Canvassing Salary & Benefits

Mailing Address 1125 17TH ST NW

City
WASHINGTONState
DCZip Code
20036

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4977

Amount Incurred This Period

225246.98

Payment This Period

0.00

Outstanding Balance at Close of This Period

225246.98

1) **SUBTOTALS** This Period This Page (optional)..... ►

228993.84

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 32 OF 139

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

EARN INTERNATIONAL UNION OF OPERATING ENGINEERS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

LANDMARK STRATEGIESNature of Debt (Purpose):
ROBO Calls

Mailing Address 8741 CENTER RD

City
SPRINGFIELDState
VAZip Code
22152

Outstanding Balance Beginning This Period

922.58

Transaction ID : SD10.4542

Amount Incurred This Period

0.00

Payment This Period

922.58

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

THOMPSON RYERNature of Debt (Purpose):
Door Hangers

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037

Outstanding Balance Beginning This Period

8132.56

Transaction ID : SD10.4543

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

8132.56

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

THOMPSON RYERNature of Debt (Purpose):
Production of Mailings

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4979

Amount Incurred This Period

52145.70

Payment This Period

0.00

Outstanding Balance at Close of This Period

52145.70

1) **SUBTOTALS** This Period This Page (optional)..... ►

60278.26

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 33 OF 139

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

EARN INTERNATIONAL UNION OF OPERATING ENGINEERS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

THOMPSON RYERNature of Debt (Purpose):
Door Hangers

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4978

Amount Incurred This Period

18974.64

Payment This Period

0.00

Outstanding Balance at Close of This Period

18974.64

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

18974.64

2) **TOTALS** This Period (last page this line number only)..... ►

308246.74

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

308246.74

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 34 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <input type="text"/> / <input type="text"/> / <input type="text"/>	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> </div>	
Mailing Address 1125 17TH ST NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">11408.50</div>	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4385 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> </div>
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ►	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> </div>	
Mailing Address 1125 17TH ST NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1138.00</div>	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4386 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> </div>
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: HASSAN, MARGARET WOOD, ,		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NH	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ►	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(a) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

Signature

[Electronically Filed]

Date / /

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 35 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ C C00624817	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY / / </div> <div>MM / DD / YYYY / / </div> </div>	

Full Name of Payee INTERNATIONAL UNION OF OPERATING ENGINEERS <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 20 / 2016		
Mailing Address 1125 17TH ST NW			Amount 189.67 Transaction ID : SE.4387 Date of Disbursement or Obligation MM / DD / YYYY 10 / 20 / 2016		
City WASHINGTON	State DC	Zip Code 20036			
Purpose of Expenditure Canvassing Salary & Benefits		Category/ Type 001			
Name of Federal Candidate: SHEA-PORTER, CAROL, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 01 State: NH		
Calendar Year-To-Date Per Election for Office Sought 1345.83			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee INTERNATIONAL UNION OF OPERATING ENGINEERS <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 20 / 2016		
Mailing Address 1125 17TH ST NW			Amount 2255.26 Transaction ID : SE.4389 Date of Disbursement or Obligation MM / DD / YYYY 10 / 20 / 2016		
City WASHINGTON	State DC	Zip Code 20036			
Purpose of Expenditure Canvassing Salary & Benefits		Category/ Type 001			
Name of Federal Candidate: DRISKELL, GRETCHEN, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 07 State: MI		
Calendar Year-To-Date Per Election for Office Sought 2255.26			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(a) SUBTOTAL of Unitemized Independent Expenditures	
(a) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

Signature

[Electronically Filed]

Date

MM / DD / YYYY
12 / 07 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 36 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ C C00624817	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> <div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>	
Full Name of Payee INTERNATIONAL UNION OF OPERATING ENGINEERS			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination
Mailing Address 1125 17TH ST NW			<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> <div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>		Amount
City WASHINGTON		State DC	Zip Code 20036	<div style="border: 1px solid black; padding: 2px; text-align: right;">1767.09</div>	
Purpose of Expenditure Canvassing Salary & Benefits			Category/Type 001		Transaction ID : SE.4390 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> <div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>
Name of Federal Candidate: MASTO, CATHERINE CORTEZ, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">13990.23</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____
Full Name of Payee INTERNATIONAL UNION OF OPERATING ENGINEERS			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination
Mailing Address 1125 17TH ST NW			<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> <div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>		Amount
City WASHINGTON		State DC	Zip Code 20036	<div style="border: 1px solid black; padding: 2px; text-align: right;">252.97</div>	
Purpose of Expenditure Canvassing Salary & Benefits			Category/Type 001		Transaction ID : SE.4391 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> <div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>
Name of Federal Candidate: TITUS, DINA, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">870.67</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____
(a) SUBTOTAL of Itemized Independent Expenditures				<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>	
(a) SUBTOTAL of Unitemized Independent Expenditures				<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>	
(a) TOTAL Independent Expenditures				<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
HICKEY, BRIAN, E, Mr., Signature			[Electronically Filed]		Date <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> <div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 37 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS		FEC IDENTIFICATION NUMBER ▼ C C00624817	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 21 / 2016	
Mailing Address 1125 17TH ST NW		Amount 9360.40	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4392
Purpose of Expenditure Canvassing Salary & Benefits		Category/ Type 001	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 21 / 2016
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought 128886.15		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 21 / 2016	
Mailing Address 1125 17TH ST NW		Amount 1077.17	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4393
Purpose of Expenditure Canvassing Salary & Benefits		Category/ Type 001	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 21 / 2016
Name of Federal Candidate: HASSAN, MARGARET WOOD, , ,		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NH	
Calendar Year-To-Date Per Election for Office Sought 8196.42		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(a) SUBTOTAL of Unitemized Independent Expenditures	
(a) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

Signature

[Electronically Filed]

Date M M / D D / Y Y Y Y Y Y
12 / 07 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 38 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 21 / 2016 </div>	
Mailing Address 1125 17TH ST NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 129.53 </div>	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4394 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 21 / 2016 </div>
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: SHEA-PORTER, CAROL, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 01 State: NH	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">1493.10</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 21 / 2016 </div>	
Mailing Address 1125 17TH ST NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 2255.26 </div>	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4396 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 21 / 2016 </div>
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: DRISKELL, GRETCHEN, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 07 State: MI	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">4510.52</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(a) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

Signature

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 12 / 07 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>
---	---

 Check if ☐ 24-hour report ☐ 48-hour report

New report

Amends report filed on

 M M / D D / Y Y Y Y Y Y
 10 / 21 / 2016

 Full Name of Payee
INTERNATIONAL UNION OF OPERATING ENGINEERS
☒ Memo Item

Date of Public Distribution/Dissemination

 M M / D D / Y Y Y Y Y Y
 10 / 21 / 2016

Mailing Address 1125 17TH ST NW

Amount

883.55

 City
 WASHINGTON

 State
 DC

 Zip Code
 20036
Transaction ID : SE.4397

Date of Disbursement or Obligation

 M M / D D / Y Y Y Y Y Y
 10 / 21 / 2016

 Purpose of Expenditure
 Canvassing Salary & Benefits

 Category/
 Type 001

Name of Federal Candidate:

MASTO, CATHERINE CORTEZ, , ,

☒ Support☐ Oppose

Office Sought:

☐ House

District: _____

☐ President☒ Senate

State: NV

 Calendar Year-To-Date
 Per Election for Office Sought

14873.78

 Disbursement For: ☐ Primary ☒ General
 2016
☐ Other (specify) ▶
 Full Name of Payee
INTERNATIONAL UNION OF OPERATING ENGINEERS
☒ Memo Item

Date of Public Distribution/Dissemination

 M M / D D / Y Y Y Y Y Y
 10 / 21 / 2016

Mailing Address 1125 17TH ST NW

Amount

117.81

 City
 WASHINGTON

 State
 DC

 Zip Code
 20036
Transaction ID : SE.4398

Date of Disbursement or Obligation

 M M / D D / Y Y Y Y Y Y
 10 / 21 / 2016

 Purpose of Expenditure
 Canvassing Salary & Benefits

 Category/
 Type 001

Name of Federal Candidate:

TITUS, DINA, , ,

☒ Support☐ Oppose

Office Sought:

☒ House

District: 01

☐ President☐ Senate

State: NV

 Calendar Year-To-Date
 Per Election for Office Sought

992.36

 Disbursement For: ☐ Primary ☒ General
 2016
☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures

0.00

(a) SUBTOTAL of Unitemized Independent Expenditures

(a) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

[Electronically Filed]

Date

 M M / D D / Y Y Y Y Y Y
 12 / 07 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address 1125 17TH ST NW			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2945.15</div>		
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4399 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">001</div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: ROSEN, JACKY, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">4248.09</div>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			2016		

Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address 1125 17TH ST NW			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">5262.26</div>		
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4400 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">001</div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">134148.41</div>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			2016		

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

Signature

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y Y Y

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on MM / DD / YYYY	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY 10 / 24 / 2016 </div>	
Mailing Address 1125 17TH ST NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 2255.26 </div>	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4401 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY 10 / 24 / 2016 </div>
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: DRISKELL, GRETCHEN, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 07 State: MI	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">6765.78</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY 10 / 25 / 2016 </div>	
Mailing Address 1125 17TH ST NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 10032.71 </div>	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4546 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY 10 / 25 / 2016 </div>
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President District: State:	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">144921.83</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(a) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

Signature

[Electronically Filed]

Date MM / DD / YYYY

12 / 07 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS		FEC IDENTIFICATION NUMBER ▼ C C00624817	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee INTERNATIONAL UNION OF OPERATING ENGINEERS <input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 25 / 2016	
Mailing Address 1125 17TH ST NW		Amount 1259.62	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4547
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type 001	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2016
Name of Federal Candidate: HASSAN, MARGARET WOOD, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NH</u>
Calendar Year-To-Date Per Election for Office Sought		9456.04	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶
Full Name of Payee INTERNATIONAL UNION OF OPERATING ENGINEERS <input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 25 / 2016	
Mailing Address 1125 17TH ST NW		Amount 209.94	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4548
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type 001	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2016
Name of Federal Candidate: SHEA-PORTER, CAROL, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NH</u>
Calendar Year-To-Date Per Election for Office Sought		1738.52	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(a) SUBTOTAL of Unitemized Independent Expenditures			
(a) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature <u>HICKEY, BRIAN, E, Mr.,</u>		Date M M / D D / Y Y Y Y Y Y 12 / 07 / 2016	
[Electronically Filed]			

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ C C00624817	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> <div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>	
Full Name of Payee INTERNATIONAL UNION OF OPERATING ENGINEERS			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination
Mailing Address 1125 17TH ST NW			<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> <div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>		Amount
City WASHINGTON		State DC	Zip Code 20036	<div style="border: 1px solid black; padding: 2px; text-align: right;">2255.26</div>	
Purpose of Expenditure Canvassing Salary & Benefits			Category/ Type 001		Transaction ID : SE.4549 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> <div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>
Name of Federal Candidate: DRISKELL, GRETCHEN, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MI
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">9127.49</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶
Full Name of Payee INTERNATIONAL UNION OF OPERATING ENGINEERS			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination
Mailing Address 1125 17TH ST NW			<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> <div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>		Amount
City WASHINGTON		State DC	Zip Code 20036	<div style="border: 1px solid black; padding: 2px; text-align: right;">1008.17</div>	
Purpose of Expenditure Canvassing Salary & Benefits			Category/ Type 001		Transaction ID : SE.4550 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> <div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>
Name of Federal Candidate: MASTO, CATHERINE CORTEZ, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">15881.95</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>	
(a) SUBTOTAL of Unitemized Independent Expenditures				<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>	
(a) TOTAL Independent Expenditures				<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
HICKEY, BRIAN, E, Mr., _____ Signature			[Electronically Filed]		Date <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> <div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 44 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <input type="text"/> / <input type="text"/> / <input type="text"/>	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 1125 17TH ST NW		<input type="text"/> / <input type="text"/> / <input type="text"/>	
City WASHINGTON	State DC	Zip Code 20036	Amount <input type="text"/>
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <input type="text"/> 001	Transaction ID : SE.4661 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: ROSEN, JACKY, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 4694.21		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 1125 17TH ST NW		<input type="text"/> / <input type="text"/> / <input type="text"/>	
City WASHINGTON	State DC	Zip Code 20036	Amount <input type="text"/>
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <input type="text"/> 001	Transaction ID : SE.4593 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 189893.96		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 0.00
(a) SUBTOTAL of Unitemized Independent Expenditures	<input type="text"/>
(a) TOTAL Independent Expenditures	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr., [Electronically Filed]
 Signature Date / /

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 45 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">26</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Mailing Address 1125 17TH ST NW				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1636.27</div>	
City WASHINGTON		State DC		Zip Code 20036	
Purpose of Expenditure Canvassing Salary & Benefits				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: HASSAN, MARGARET WOOD, , ,				Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> District: _____ State: <u>NH</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">11654.24</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">26</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Mailing Address 1125 17TH ST NW				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2015.37</div>	
City WASHINGTON		State DC		Zip Code 20036	
Purpose of Expenditure Canvassing Salary & Benefits				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: DRISKELL, GRETCHEN, , ,				Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> District: <u>07</u> State: <u>MI</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">11706.70</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>(a) SUBTOTAL of Itemized Independent Expenditures</p> <p>(a) SUBTOTAL of Unitemized Independent Expenditures</p> <p>(a) TOTAL Independent Expenditures</p> </div> <div style="width: 35%;"> <div style="border: 1px solid black; padding: 2px; text-align: right; margin-bottom: 10px;">0.00</div> <div style="border: 1px solid black; padding: 2px; text-align: right; margin-bottom: 10px;"></div> <div style="border: 1px solid black; padding: 2px; text-align: right;"></div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u>				Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">12</div> <div style="border: 1px solid black; padding: 2px;">07</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 46 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div>10</div> <div>26</div> <div>2016</div> </div>	
Mailing Address 1125 17TH ST NW				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1008.17</div>	
City WASHINGTON		State DC		Zip Code 20036	
Purpose of Expenditure Canvassing Salary & Benefits				Category/Type <div style="border: 1px solid black; padding: 2px;">001</div>	
Name of Federal Candidate: MASTO, CATHERINE CORTEZ, , ,				Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">17746.31</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div>10</div> <div>26</div> <div>2016</div> </div>	
Mailing Address 1125 17TH ST NW				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">272.71</div>	
City WASHINGTON		State DC		Zip Code 20036	
Purpose of Expenditure Canvassing Salary & Benefits				Category/Type <div style="border: 1px solid black; padding: 2px;">001</div>	
Name of Federal Candidate: SHEA-PORTER, CAROL, , ,				Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NH	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">2484.45</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (a) SUBTOTAL of Itemized Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px;">0.00</div> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> (a) SUBTOTAL of Unitemized Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; height: 20px;"></div> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> (a) TOTAL Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; height: 20px;"></div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u> [Electronically Filed]				Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div>12</div> <div>07</div> <div>2016</div> </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <input type="text"/> / <input type="text"/> / <input type="text"/>	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 1125 17TH ST NW		Amount <input type="text"/>	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4663 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Purpose of Expenditure Canvassing Salary & Benefits		Category/ Type <input type="text"/> 001	<input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: ROSEN, JACKY, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 4804.02		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 1125 17TH ST NW		Amount <input type="text"/>	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4669 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Purpose of Expenditure Canvassing Salary & Benefits		Category/ Type <input type="text"/> 001	<input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State:
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 202931.38		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 0.00
(a) SUBTOTAL of Unitemized Independent Expenditures	<input type="text"/>
(a) TOTAL Independent Expenditures	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,
 Signature

[Electronically Filed]
 Date / /

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 48 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">27</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Mailing Address 1125 17TH ST NW				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1636.27</div>	
City WASHINGTON		State DC		Zip Code 20036	
Purpose of Expenditure Canvassing Salary & Benefits				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: HASSAN, MARGARET WOOD, , ,				Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NH</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">13396.96</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">27</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Mailing Address 1125 17TH ST NW				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">272.71</div>	
City WASHINGTON		State DC		Zip Code 20036	
Purpose of Expenditure Canvassing Salary & Benefits				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: SHEA-PORTER, CAROL, , ,				Office Sought: <input checked="" type="checkbox"/> House District: <u>01</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NH</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">2774.90</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>(a) SUBTOTAL of Itemized Independent Expenditures</p> <p>(a) SUBTOTAL of Unitemized Independent Expenditures</p> <p>(a) TOTAL Independent Expenditures</p> </div> <div style="width: 35%;"> <div style="border: 1px solid black; padding: 2px; text-align: right; margin-bottom: 10px;">0.00</div> <div style="border: 1px solid black; padding: 2px; text-align: right; margin-bottom: 10px;"></div> <div style="border: 1px solid black; padding: 2px; text-align: right;"></div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u>				Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">12</div> <div style="border: 1px solid black; padding: 2px;">07</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on MM / DD / YYYY	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY 10 / 27 / 2016 </div>	
Mailing Address 1125 17TH ST NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 2015.37 </div>	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4672 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY 10 / 27 / 2016 </div>
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: DRISKELL, GRETCHEN, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 07 State: MI	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">13828.52</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY 10 / 27 / 2016 </div>	
Mailing Address 1125 17TH ST NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 1008.17 </div>	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4673 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY 10 / 27 / 2016 </div>
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: MASTO, CATHERINE CORTEZ, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: State: NV	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">18881.88</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(a) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

Signature

[Electronically Filed]

Date MM / DD / YYYY
12 / 07 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 50 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 27 / 2016 </div>	
Mailing Address 1125 17TH ST NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 101.17 </div>	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4674 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 27 / 2016 </div>
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: ROSEN, JACKY, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 03 State: NV	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">4913.83</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 28 / 2016 </div>	
Mailing Address 1125 17TH ST NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 2492.85 </div>	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4756 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 28 / 2016 </div>
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President District: State:	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">341354.87</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(a) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

Signature

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 12 / 07 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 51 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>							
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report Amends report filed on MM / DD / YYYY											
Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS				Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016							
Mailing Address 1125 17TH ST NW				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1246.43</div>							
City WASHINGTON		State DC		Zip Code 20036							
Purpose of Expenditure Canvassing Salary & Benefits				Category/Type 001							
Name of Federal Candidate: HASSAN, MARGARET WOOD, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NH</u>							
Calendar Year-To-Date Per Election for Office Sought 15588.58				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____							
Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS				Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016							
Mailing Address 1125 17TH ST NW				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">207.74</div>							
City WASHINGTON		State DC		Zip Code 20036							
Purpose of Expenditure Canvassing Salary & Benefits				Category/Type 001							
Name of Federal Candidate: SHEA-PORTER, CAROL, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <u>01</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NH</u>							
Calendar Year-To-Date Per Election for Office Sought 3018.12				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____							
<table style="width:100%;"> <tr> <td style="width:60%;">(a) SUBTOTAL of Itemized Independent Expenditures</td> <td style="width:40%; text-align: right;">▶ 0.00</td> </tr> <tr> <td>(a) SUBTOTAL of Unitemized Independent Expenditures</td> <td style="text-align: right;">▶ </td> </tr> <tr> <td>(a) TOTAL Independent Expenditures</td> <td style="text-align: right;">▶ </td> </tr> </table>						(a) SUBTOTAL of Itemized Independent Expenditures	▶ 0.00	(a) SUBTOTAL of Unitemized Independent Expenditures	▶ 	(a) TOTAL Independent Expenditures	▶
(a) SUBTOTAL of Itemized Independent Expenditures	▶ 0.00										
(a) SUBTOTAL of Unitemized Independent Expenditures	▶ 										
(a) TOTAL Independent Expenditures	▶ 										
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.											
HICKEY, BRIAN, E, Mr., _____ Signature				Date MM / DD / YYYY 12 / 07 / 2016							

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 52 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 200px;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div></div> <div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div></div> <div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>					
Full Name of Payee <input type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 200px;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div></div> <div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div></div> <div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>		
Mailing Address 1125 17TH ST NW			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">69910.38</div>		
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4947 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 200px;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div></div> <div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div></div> <div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>		
Purpose of Expenditure Canvassing Salaries & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	<div style="display: flex; justify-content: space-between; width: 200px;"> <div><div style="border: 1px solid black; padding: 2px;">10</div></div> <div><div style="border: 1px solid black; padding: 2px;">28</div></div> <div><div style="border: 1px solid black; padding: 2px;">2016</div></div> </div>		
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: _____		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">360860.24</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <input type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 200px;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div></div> <div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div></div> <div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>		
Mailing Address 1125 17TH ST NW			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">7557.72</div>		
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4948 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 200px;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div></div> <div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div></div> <div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>		
Purpose of Expenditure Canvassing Salaries & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	<div style="display: flex; justify-content: space-between; width: 200px;"> <div><div style="border: 1px solid black; padding: 2px;">10</div></div> <div><div style="border: 1px solid black; padding: 2px;">28</div></div> <div><div style="border: 1px solid black; padding: 2px;">2016</div></div> </div>		
Name of Federal Candidate: HASSAN, MARGARET WOOD, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: NH		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">15799.96</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">77468.10</div>		
(a) SUBTOTAL of Unitemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"></div>		
(a) TOTAL Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"></div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature HICKEY, BRIAN, E, Mr.,		[Electronically Filed]		Date <div style="display: flex; justify-content: space-between; width: 200px;"> <div><div style="border: 1px solid black; padding: 2px;">12</div></div> <div><div style="border: 1px solid black; padding: 2px;">07</div></div> <div><div style="border: 1px solid black; padding: 2px;">2016</div></div> </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 53 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00624817 </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M M /

D D D /

Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px;">M M M /</div> <div style="border: 1px solid black; padding: 2px;">D D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 1125 17TH ST NW			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1259.64</div> Transaction ID : SE.4949 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px;">M M M /</div> <div style="border: 1px solid black; padding: 2px;">D D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
City WASHINGTON	State DC	Zip Code 20036		
Purpose of Expenditure Canvassing Salaries & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>		
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose SHEA-PORTER, CAROL, , ,			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 01 State: NH	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">3229.50</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px;">M M M /</div> <div style="border: 1px solid black; padding: 2px;">D D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 1125 17TH ST NW			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">13531.56</div> Transaction ID : SE.4952 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px;">M M M /</div> <div style="border: 1px solid black; padding: 2px;">D D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
City WASHINGTON	State DC	Zip Code 20036		
Purpose of Expenditure Canvassing Salaries & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>		
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose DRISKELL, GRETCHEN, , ,			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 07 State: MI	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">14972.59</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; text-align: right;">14791.20</div>
(a) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 54 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report Amends report filed on MM / DD / YYYY					
Full Name of Payee <input type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS				Date of Public Distribution/Dissemination MM / DD / YYYY	
Mailing Address 1125 17TH ST NW				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">10602.54</div>	
City WASHINGTON		State DC		Zip Code 20036	
Purpose of Expenditure Canvassing Salaries & Benefits				Category/Type 001	
Name of Federal Candidate: MASTO, CATHERINE CORTEZ, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NV</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">31607.39</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <input type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS				Date of Public Distribution/Dissemination MM / DD / YYYY	
Mailing Address 1125 17TH ST NW				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">594.39</div>	
City WASHINGTON		State DC		Zip Code 20036	
Purpose of Expenditure Canvassing Salaries & Benefits				Category/Type 001	
Name of Federal Candidate: TITUS, DINA, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <u>01</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NV</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">1548.79</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures				<div style="border: 1px solid black; padding: 2px; display: inline-block;">11196.93</div>	
(a) SUBTOTAL of Unitemized Independent Expenditures				<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
(a) TOTAL Independent Expenditures				<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u>				Date 12 / 07 / 2016	

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 55 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on MM / DD / YYYY	

Full Name of Payee <input type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS		Date of Public Distribution/Dissemination MM / DD / YYYY	
Mailing Address 1125 17TH ST NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 923.43 </div>	
City WASHINGTON	State DC	Zip Code 20036	
Purpose of Expenditure Canvassing Salaries & Benefits		Category/Type 001	
Name of Federal Candidate: ROSEN, JACKY, , ,		Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate	
Calendar Year-To-Date Per Election for Office Sought 6343.06		District: 03 State: NV	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		Date of Disbursement or Obligation MM / DD / YYYY	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS		Date of Public Distribution/Dissemination MM / DD / YYYY	
Mailing Address 1125 17TH ST NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 1246.43 </div>	
City WASHINGTON	State DC	Zip Code 20036	
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type 001	
Name of Federal Candidate: HASSAN, MARGARET WOOD, , ,		Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate	
Calendar Year-To-Date Per Election for Office Sought 17046.39		District: NH State: NH	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		Date of Disbursement or Obligation MM / DD / YYYY	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 923.43 </div>
(a) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div>
(a) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 923.43 </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,
 Signature

[Electronically Filed]

Date MM / DD / YYYY

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 56 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>			
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>							
Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">29</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>			
Mailing Address 1125 17TH ST NW				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;"> 2492.85 </div>			
City WASHINGTON		State DC				Zip Code 20036	
Purpose of Expenditure Canvassing Salary & Benefits						Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,				Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____			
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">363353.09</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____			
Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">29</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>			
Mailing Address 1125 17TH ST NW				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;"> 207.74 </div>			
City WASHINGTON		State DC				Zip Code 20036	
Purpose of Expenditure Canvassing Salary & Benefits						Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: SHEA-PORTER, CAROL, ,				Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NH			
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">3437.24</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____			
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>(a) SUBTOTAL of Itemized Independent Expenditures</p> <p>(a) SUBTOTAL of Unitemized Independent Expenditures</p> <p>(a) TOTAL Independent Expenditures</p> </div> <div style="width: 35%;"> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">0.00</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%; height: 20px;"></div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%; height: 20px;"></div> </div> </div>							
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.							
HICKEY, BRIAN, E, Mr., _____ Signature				Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">12</div> <div style="border: 1px solid black; padding: 2px;">07</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>			

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 57 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 31 / 2016 </div>	
Mailing Address 1125 17TH ST NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 9933.45 </div>	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4815 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 31 / 2016 </div>
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 374815.86 </div>	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016		<input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 31 / 2016 </div>	
Mailing Address 1125 17TH ST NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 1437.40 </div>	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4816 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 31 / 2016 </div>
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: HASSAN, MARGARET WOOD, ,		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NH	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 18483.79 </div>	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016		<input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div>
(a) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div>
(a) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

Signature

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 12 / 07 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 58 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">31</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Mailing Address 1125 17TH ST NW				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2015.37</div>	
City WASHINGTON		State DC		Zip Code 20036	
Purpose of Expenditure Canvassing Salary & Benefits				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: DRISKELL, GRETCHEN, , ,				Office Sought: <input checked="" type="checkbox"/> House District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MI	
Calendar Year-To-Date Per Election for Office Sought				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; text-align: right;">16987.96</div>					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">31</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Mailing Address 1125 17TH ST NW				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">239.57</div>	
City WASHINGTON		State DC		Zip Code 20036	
Purpose of Expenditure Canvassing Salary & Benefits				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: SHEA-PORTER, CAROL, , ,				Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NH	
Calendar Year-To-Date Per Election for Office Sought				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; text-align: right;">3676.81</div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>(a) SUBTOTAL of Itemized Independent Expenditures</p> <p>(a) SUBTOTAL of Unitemized Independent Expenditures</p> <p>(a) TOTAL Independent Expenditures</p> </div> <div style="width: 35%;"> <div style="border: 1px solid black; padding: 2px; text-align: right; margin-bottom: 10px;">0.00</div> <div style="border: 1px solid black; padding: 2px; text-align: right; margin-bottom: 10px;"></div> <div style="border: 1px solid black; padding: 2px; text-align: right;"></div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u>				Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">12</div> <div style="border: 1px solid black; padding: 2px;">07</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 59 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS		FEC IDENTIFICATION NUMBER ▼ C C00624817	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on MM / DD / YYYY	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 31 / 2016	
Mailing Address 1125 17TH ST NW		Amount 294.52	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4910
Purpose of Expenditure Canvassing Salary & Benefits		Category/ Type 001	Date of Disbursement or Obligation MM / DD / YYYY 10 / 31 / 2016
Name of Federal Candidate: MASTO, CATHERINE CORTEZ, , ,		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought 31901.91		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 31 / 2016	
Mailing Address 1125 17TH ST NW		Amount 294.52	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4911
Purpose of Expenditure Canvassing Salary & Benefits		Category/ Type 001	Date of Disbursement or Obligation MM / DD / YYYY 10 / 31 / 2016
Name of Federal Candidate: KIHUEN, RUBEN, , ,		Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought 1077.34		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(a) SUBTOTAL of Unitemized Independent Expenditures	
(a) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,
 Signature

[Electronically Filed]

Date MM / DD / YYYY
 12 / 07 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 60 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ C C00624817	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Full Name of Payee INTERNATIONAL UNION OF OPERATING ENGINEERS <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address 1125 17TH ST NW			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2015.37</div>		
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4831 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure Canvassing Salary & Benefits		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: DRISKELL, GRETCHEN, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>07</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>MI</u>		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">19109.77</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee INTERNATIONAL UNION OF OPERATING ENGINEERS <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address 1125 17TH ST NW			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1437.40</div>		
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4832 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure Canvassing Salary & Benefits		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: HASSAN, MARGARET WOOD, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NH</u>		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">20027.63</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>		
(a) SUBTOTAL of Unitemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
(a) TOTAL Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>HICKEY, BRIAN, E, Mr.,</i>		[Electronically Filed]		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 61 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ C C00624817	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div></div> <div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div></div> <div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>	
Full Name of Payee INTERNATIONAL UNION OF OPERATING ENGINEERS			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination
Mailing Address 1125 17TH ST NW			<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div></div> <div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div></div> <div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>		
City WASHINGTON		State DC	Zip Code 20036	Amount 7577.33	
Purpose of Expenditure Canvassing Salary & Benefits			Category/ Type 001		Transaction ID : SE.4833
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Date of Disbursement or Obligation
Calendar Year-To-Date Per Election for Office Sought			383133.88		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶
Full Name of Payee INTERNATIONAL UNION OF OPERATING ENGINEERS			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination
Mailing Address 1125 17TH ST NW			<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div></div> <div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div></div> <div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>		
City WASHINGTON		State DC	Zip Code 20036	Amount 239.57	
Purpose of Expenditure Canvassing Salary & Benefits			Category/ Type 001		Transaction ID : SE.4905
Name of Federal Candidate: SHEA-PORTER, CAROL, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Date of Disbursement or Obligation
Calendar Year-To-Date Per Election for Office Sought			3916.38		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				0.00	
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature HICKEY, BRIAN, E, Mr.,			[Electronically Filed]		Date
					<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div></div> <div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div></div> <div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 62 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 11 / 02 / 2016 </div>	
Mailing Address 1125 17TH ST NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 12687.32 </div>	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4846 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 11 / 02 / 2016 </div>
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ►	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 11 / 02 / 2016 </div>	
Mailing Address 1125 17TH ST NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 1636.27 </div>	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4847 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 11 / 02 / 2016 </div>
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: HASSAN, MARGARET WOOD, ,		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NH</u>	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ►	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div>
(a) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div>
(a) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature _____ HICKEY, BRIAN, E, Mr.,	[Electronically Filed]	Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 12 / 07 / 2016 </div>
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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 63 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00624817 </div>
---	--

 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M /

D D /

Y Y Y Y Y Y

Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 1125 17TH ST NW			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2015.37</div>	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4848 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: DRISKELL, GRETCHEN, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MI	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">21231.58</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 1125 17TH ST NW			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">272.71</div>	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4906 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: SHEA-PORTER, CAROL, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NH	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">4189.09</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	0.00
(a) SUBTOTAL of Unitemized Independent Expenditures	▶	
(a) TOTAL Independent Expenditures	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y Y Y

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 64 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report Amends report filed on MM / DD / YYYY					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS				Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 02 / 2016	
Mailing Address 1125 17TH ST NW				Amount 589.03	
City WASHINGTON		State DC		Zip Code 20036	
Purpose of Expenditure Canvassing Salary & Benefits				Category/Type 001	
Name of Federal Candidate: KIHUEN, RUBEN, , ,				Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought 1666.37				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS				Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 02 / 2016	
Mailing Address 1125 17TH ST NW				Amount 589.03	
City WASHINGTON		State DC		Zip Code 20036	
Purpose of Expenditure Canvassing Salary & Benefits				Category/Type 001	
Name of Federal Candidate: ROSEN, JACKY, , ,				Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought 6932.09				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<div style="display: flex; justify-content: space-between;"> <div> (a) SUBTOTAL of Itemized Independent Expenditures </div> <div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div>(a) SUBTOTAL of Unitemized Independent Expenditures</div> <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div>(a) TOTAL Independent Expenditures</div> <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u>				Date MM / DD / YYYY 12 / 07 / 2016	

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 65 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 11 / 03 / 2016 </div>	
Mailing Address 1125 17TH ST NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 2015.37 </div>	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4861 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 11 / 03 / 2016 </div>
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: DRISKELL, GRETCHEN, , ,		Office Sought: <input checked="" type="checkbox"/> House District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MI	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">23353.39</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 11 / 03 / 2016 </div>	
Mailing Address 1125 17TH ST NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 1372.10 </div>	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4862 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 11 / 03 / 2016 </div>
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: HASSAN, MARGARET WOOD, , ,		Office Sought: <input type="checkbox"/> House District: <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NH	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">23248.88</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(a) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

Signature

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 12 / 07 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 66 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ C C00624817	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div><div>M</div><div>M</div><div></div></div> <div><div>D</div><div>D</div><div></div></div> <div><div>Y</div><div>Y</div><div>Y</div><div>Y</div><div>Y</div><div>Y</div></div> </div>	

Full Name of Payee INTERNATIONAL UNION OF OPERATING ENGINEERS <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><div>M</div><div>M</div><div></div></div> <div><div>D</div><div>D</div><div></div></div> <div><div>Y</div><div>Y</div><div>Y</div><div>Y</div><div>Y</div><div>Y</div></div> </div>		
Mailing Address 1125 17TH ST NW			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">9802.85</div>		
City WASHINGTON	State DC	Zip Code 20036			
Purpose of Expenditure Canvassing Salary & Benefits		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>	Transaction ID : SE.4863 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><div>M</div><div>M</div><div></div></div> <div><div>D</div><div>D</div><div></div></div> <div><div>Y</div><div>Y</div><div>Y</div><div>Y</div><div>Y</div><div>Y</div></div> </div>		
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: _____		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">413311.05</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee INTERNATIONAL UNION OF OPERATING ENGINEERS <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><div>M</div><div>M</div><div></div></div> <div><div>D</div><div>D</div><div></div></div> <div><div>Y</div><div>Y</div><div>Y</div><div>Y</div><div>Y</div><div>Y</div></div> </div>		
Mailing Address 1125 17TH ST NW			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">228.68</div>		
City WASHINGTON	State DC	Zip Code 20036			
Purpose of Expenditure Canvassing Salary & Benefits		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>	Transaction ID : SE.4907 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><div>M</div><div>M</div><div></div></div> <div><div>D</div><div>D</div><div></div></div> <div><div>Y</div><div>Y</div><div>Y</div><div>Y</div><div>Y</div><div>Y</div></div> </div>		
Name of Federal Candidate: SHEA-PORTER, CAROL, , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 01 State: NH		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">4417.77</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

Signature

[Electronically Filed]

Date

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Y

Y

Y

Y

Y

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 67 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on MM / DD / YYYY	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY 11 / 04 / 2016 </div>	
Mailing Address 1125 17TH ST NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 2015.37 </div>	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4870 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY 11 / 04 / 2016 </div>
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: DRISKELL, GRETCHEN, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 07 State: MI	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">25581.64</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY 11 / 04 / 2016 </div>	
Mailing Address 1125 17TH ST NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 1372.10 </div>	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4871 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY 11 / 04 / 2016 </div>
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: HASSAN, MARGARET WOOD, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: State: NH	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">24833.86</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(a) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

Signature

[Electronically Filed]

Date MM / DD / YYYY

12 / 07 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 68 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">11</div> <div style="border: 1px solid black; padding: 2px;">04</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Mailing Address 1125 17TH ST NW				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">9802.85</div>	
City WASHINGTON		State DC		Zip Code 20036	
Purpose of Expenditure Canvassing Salary & Benefits				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,				Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought				<div style="border: 1px solid black; padding: 2px; text-align: right;">427943.74</div>	
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">11</div> <div style="border: 1px solid black; padding: 2px;">04</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Mailing Address 1125 17TH ST NW				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">3239.67</div>	
City WASHINGTON		State DC		Zip Code 20036	
Purpose of Expenditure Canvassing Salary & Benefits				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: KIHUEN, RUBEN, ,				Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought				<div style="border: 1px solid black; padding: 2px; text-align: right;">4906.04</div>	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>(a) SUBTOTAL of Itemized Independent Expenditures</p> <p>(a) SUBTOTAL of Unitemized Independent Expenditures</p> <p>(a) TOTAL Independent Expenditures</p> </div> <div style="width: 35%;"> <div style="border: 1px solid black; padding: 2px; text-align: right; margin-bottom: 10px;">0.00</div> <div style="border: 1px solid black; padding: 2px; text-align: right; margin-bottom: 10px;"></div> <div style="border: 1px solid black; padding: 2px; text-align: right;"></div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u>				Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">12</div> <div style="border: 1px solid black; padding: 2px;">07</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 69 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ C C00624817	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div><div>M</div><div>M</div><div>M</div></div> <div><div>D</div><div>D</div><div>D</div></div> <div><div>Y</div><div>Y</div><div>Y</div><div>Y</div><div>Y</div><div>Y</div></div> </div>	
Full Name of Payee INTERNATIONAL UNION OF OPERATING ENGINEERS			<input checked="" type="checkbox"/> Memo Item		
Mailing Address 1125 17TH ST NW			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><div>M</div><div>M</div><div>M</div></div> <div><div>D</div><div>D</div><div>D</div></div> <div><div>Y</div><div>Y</div><div>Y</div><div>Y</div><div>Y</div><div>Y</div></div> </div>		
City WASHINGTON		State DC	Zip Code 20036		
Purpose of Expenditure Canvassing Salary & Benefits		Category/ Type 001		Amount 228.68	
Name of Federal Candidate: SHEA-PORTER, CAROL, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 01 State: NH		
Calendar Year-To-Date Per Election for Office Sought			4646.45		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General			2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee INTERNATIONAL UNION OF OPERATING ENGINEERS			<input checked="" type="checkbox"/> Memo Item		
Mailing Address 1125 17TH ST NW			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><div>M</div><div>M</div><div>M</div></div> <div><div>D</div><div>D</div><div>D</div></div> <div><div>Y</div><div>Y</div><div>Y</div><div>Y</div><div>Y</div><div>Y</div></div> </div>		
City WASHINGTON		State DC	Zip Code 20036		
Purpose of Expenditure Canvassing Salary & Benefits		Category/ Type 001		Amount 3239.67	
Name of Federal Candidate: KIHUEN, RUBEN, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 04 State: NV		
Calendar Year-To-Date Per Election for Office Sought			8145.71		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General			2016 <input type="checkbox"/> Other (specify) ▶		
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>(a) SUBTOTAL of Itemized Independent Expenditures</p> <p>(a) SUBTOTAL of Unitemized Independent Expenditures</p> <p>(a) TOTAL Independent Expenditures</p> </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">0.00</div> <div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; padding: 2px;"></div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
HICKEY, BRIAN, E, Mr., _____ Signature			[Electronically Filed] Date <div style="display: flex; justify-content: space-between;"> <div><div>M</div><div>M</div><div>M</div></div> <div><div>D</div><div>D</div><div>D</div></div> <div><div>Y</div><div>Y</div><div>Y</div><div>Y</div><div>Y</div><div>Y</div></div> </div>		

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 70 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>				
Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 1125 17TH ST NW			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2356.12</div>	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4890 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Canvassing Salary & Benefits		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>	<div style="border: 1px solid black; padding: 2px; text-align: right;">2356.12</div>	
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">446507.34</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 1125 17TH ST NW			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">3239.67</div>	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4894 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Canvassing Salary & Benefits		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>	<div style="border: 1px solid black; padding: 2px; text-align: right;">3239.67</div>	
Name of Federal Candidate: KIHUEN, RUBEN, , ,			Office Sought: <input checked="" type="checkbox"/> House District: <u>04</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NV</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">11385.38</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>(a) SUBTOTAL of Itemized Independent Expenditures</p> <p>(a) SUBTOTAL of Unitemized Independent Expenditures</p> <p>(a) TOTAL Independent Expenditures</p> </div> <div style="width: 35%;"> <div style="border: 1px solid black; padding: 2px; text-align: right; margin-bottom: 10px;">0.00</div> <div style="border: 1px solid black; padding: 2px; text-align: right; margin-bottom: 10px;"></div> <div style="border: 1px solid black; padding: 2px; text-align: right;"></div> </div> </div>				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
HICKEY, BRIAN, E, Mr., _____ Signature			Date <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div>	

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 71 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on MM / DD / YYYY	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY 11 / 06 / 2016 </div>	
Mailing Address 1125 17TH ST NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 9802.85 </div>	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4895 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY 11 / 06 / 2016 </div>
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">456310.19</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY 11 / 06 / 2016 </div>	
Mailing Address 1125 17TH ST NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 2015.37 </div>	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4896 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY 11 / 06 / 2016 </div>
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: DRISKELL, GRETCHEN, ,		Office Sought: <input checked="" type="checkbox"/> House District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MI	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">27597.01</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(a) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

Signature

[Electronically Filed]

Date

MM / DD / YYYY

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 72 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ C C00624817							
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report Amends report filed on M M / D D / Y Y Y Y Y Y											
Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 06 / 2016							
Mailing Address 1125 17TH ST NW				Amount 1372.10							
City WASHINGTON		State DC		Zip Code 20036							
Purpose of Expenditure Canvassing Salary & Benefits				Category/Type 001							
Name of Federal Candidate: HASSAN, MARGARET WOOD, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NH</u>							
Calendar Year-To-Date Per Election for Office Sought 26205.96				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____							
Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 07 / 2016							
Mailing Address 1125 17TH ST NW				Amount 2015.37							
City WASHINGTON		State DC		Zip Code 20036							
Purpose of Expenditure Canvassing Salary & Benefits				Category/Type 001							
Name of Federal Candidate: DRISKELL, GRETCHEN, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <u>07</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>MI</u>							
Calendar Year-To-Date Per Election for Office Sought 29718.82				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____							
<table style="width:100%;"> <tr> <td style="width:60%;">(a) SUBTOTAL of Itemized Independent Expenditures</td> <td style="width:40%; text-align: right;">▶ 0.00</td> </tr> <tr> <td>(a) SUBTOTAL of Unitemized Independent Expenditures</td> <td style="text-align: right;">▶ </td> </tr> <tr> <td>(a) TOTAL Independent Expenditures</td> <td style="text-align: right;">▶ </td> </tr> </table>						(a) SUBTOTAL of Itemized Independent Expenditures	▶ 0.00	(a) SUBTOTAL of Unitemized Independent Expenditures	▶ 	(a) TOTAL Independent Expenditures	▶
(a) SUBTOTAL of Itemized Independent Expenditures	▶ 0.00										
(a) SUBTOTAL of Unitemized Independent Expenditures	▶ 										
(a) TOTAL Independent Expenditures	▶ 										
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.											
HICKEY, BRIAN, E, Mr., Signature				Date M M / D D / Y Y Y Y Y Y 12 / 07 / 2016							

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 73 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 1125 17TH ST NW				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1372.10</div>	
City WASHINGTON		State DC		Zip Code 20036	
Purpose of Expenditure Canvassing Salary & Benefits				Category/Type <div style="border: 1px solid black; padding: 2px;">001</div>	
Name of Federal Candidate: HASSAN, MARGARET WOOD, ,				Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> State: NH	
Calendar Year-To-Date Per Election for Office Sought				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 1125 17TH ST NW				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">9802.85</div>	
City WASHINGTON		State DC		Zip Code 20036	
Purpose of Expenditure Canvassing Salary & Benefits				Category/Type <div style="border: 1px solid black; padding: 2px;">001</div>	
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,				Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> State:	
Calendar Year-To-Date Per Election for Office Sought				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>(a) SUBTOTAL of Itemized Independent Expenditures</p> <p>(a) SUBTOTAL of Unitemized Independent Expenditures</p> <p>(a) TOTAL Independent Expenditures</p> </div> <div style="width: 35%;"> <div style="border: 1px solid black; padding: 2px; text-align: right; margin-bottom: 10px;">0.00</div> <div style="border: 1px solid black; padding: 2px; text-align: right; margin-bottom: 10px;"></div> <div style="border: 1px solid black; padding: 2px; text-align: right;"></div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u>				Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 74 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <div style="float: right; text-align: right;"> New report Amends report filed on MM / DD / YYYY </div>			
Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY 11 / 07 / 2016 </div>	
Mailing Address 1125 17TH ST NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 3239.67 </div>	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4929 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY 11 / 07 / 2016 </div>
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type 001	
Name of Federal Candidate: KIHUEN, RUBEN, ,		<input checked="" type="checkbox"/> Support Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 14625.05 </div>	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			
Full Name of Payee <input checked="" type="checkbox"/> Memo Item LANDMARK STRATEGIES		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY 10 / 25 / 2016 </div>	
Mailing Address 8741 CENTER RD		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 2175.93 </div>	
City SPRINGFIELD	State VA	Zip Code 22152	Transaction ID : SE.4554 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY 10 / 25 / 2016 </div>
Purpose of Expenditure Live Calls		Category/Type 004	
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,		<input checked="" type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 147097.76 </div>	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div>	
(a) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div>	
(a) TOTAL Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature HICKEY, BRIAN, E, Mr.,		Date MM / DD / YYYY 12 / 07 / 2016	
[Electronically Filed]			

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 75 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item LANDMARK STRATEGIES				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">25</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Mailing Address 8741 CENTER RD				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>	
City SPRINGFIELD		State VA		Zip Code 22152	
Purpose of Expenditure Live Calls				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: HASSAN, MARGARET WOOD, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">9456.04</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item LANDMARK STRATEGIES				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">25</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Mailing Address 8741 CENTER RD				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>	
City SPRINGFIELD		State VA		Zip Code 22152	
Purpose of Expenditure Live Calls				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: SHEA-PORTER, CAROL, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">1738.52</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (a) SUBTOTAL of Itemized Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (a) SUBTOTAL of Unitemized Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (a) TOTAL Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u>				Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">12</div> <div style="border: 1px solid black; padding: 2px;">07</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 76 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item LANDMARK STRATEGIES				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">25</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Mailing Address 8741 CENTER RD				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>	
City SPRINGFIELD		State VA		Zip Code 22152	
Purpose of Expenditure Live Calls				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: DRISKELL, GRETCHEN, , ,				Office Sought: <input checked="" type="checkbox"/> House District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MI	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">9127.49</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item LANDMARK STRATEGIES				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">25</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Mailing Address 8741 CENTER RD				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>	
City SPRINGFIELD		State VA		Zip Code 22152	
Purpose of Expenditure Live Calls				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: MASTO, CATHERINE CORTEZ, , ,				Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">15881.95</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (a) SUBTOTAL of Itemized Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (a) SUBTOTAL of Unitemized Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (a) TOTAL Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u>				Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">12</div> <div style="border: 1px solid black; padding: 2px;">07</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 77 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <div style="float: right; text-align: right;"> New report Amends report filed on MM / DD / YYYY </div>					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item LANDMARK STRATEGIES			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 25 / 2016		
Mailing Address 8741 CENTER RD			Amount 0.00		
City SPRINGFIELD	State VA	Zip Code 22152	Transaction ID : SE.4559 Date of Disbursement or Obligation MM / DD / YYYY 10 / 25 / 2016		
Purpose of Expenditure Live Calls		Category/ Type 004			
Name of Federal Candidate: ROSEN, JACKY, , ,			<input checked="" type="checkbox"/> Support Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV		
Calendar Year-To-Date Per Election for Office Sought 4265.37			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <input checked="" type="checkbox"/> Memo Item LANDMARK STRATEGIES			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 25 / 2016		
Mailing Address 8741 CENTER RD			Amount 0.00		
City SPRINGFIELD	State VA	Zip Code 22152	Transaction ID : SE.4565 Date of Disbursement or Obligation MM / DD / YYYY 10 / 25 / 2016		
Purpose of Expenditure Live Calls		Category/ Type 004			
Name of Federal Candidate: TITUS, DINA, , ,			<input checked="" type="checkbox"/> Support Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV		
Calendar Year-To-Date Per Election for Office Sought 1000.12			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			0.00		
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u>		[Electronically Filed]		Date MM / DD / YYYY 12 / 07 / 2016	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <div style="float: right; text-align: right;"> New report Amends report filed on MM / DD / YYYY </div>					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item LANDMARK STRATEGIES			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> MM / DD / YYYY </div> <div style="display: flex; align-items: center;"> 10 / 25 / 2016 </div>		
Mailing Address 8741 CENTER RD			Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> 0.00 </div>		
City SPRINGFIELD	State VA	Zip Code 22152			
Purpose of Expenditure Live Calls		Category/Type 004	Transaction ID : SE.4566 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> MM / DD / YYYY </div> <div style="display: flex; align-items: center;"> 10 / 25 / 2016 </div>		
Name of Federal Candidate: KIHUEN, RUBEN, ,			<div style="display: flex; justify-content: space-between;"> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <div> Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV </div> </div>		
Calendar Year-To-Date Per Election for Office Sought 259.01			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <input checked="" type="checkbox"/> Memo Item LANDMARK STRATEGIES			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> MM / DD / YYYY </div> <div style="display: flex; align-items: center;"> 10 / 26 / 2016 </div>		
Mailing Address 8741 CENTER RD			Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> 2070.44 </div>		
City SPRINGFIELD	State VA	Zip Code 22152			
Purpose of Expenditure Live Calls		Category/Type 004	Transaction ID : SE.4597 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> MM / DD / YYYY </div> <div style="display: flex; align-items: center;"> 10 / 26 / 2016 </div>		
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,			<div style="display: flex; justify-content: space-between;"> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <div> Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ </div> </div>		
Calendar Year-To-Date Per Election for Office Sought 191964.40			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures ▶			<div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> 0.00 </div>		
(a) SUBTOTAL of Unitemized Independent Expenditures ▶			<div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> </div>		
(a) TOTAL Independent Expenditures ▶			<div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u>		[Electronically Filed]		Date MM / DD / YYYY <div style="display: flex; align-items: center;"> 12 / 07 / 2016 </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Full Name of Payee LANDMARK STRATEGIES			<input checked="" type="checkbox"/> Memo Item Date of Public Distribution/Dissemination		<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>
Mailing Address 8741 CENTER RD			Amount		<div style="border: 1px solid black; padding: 2px; text-align: right;">877.69</div>
City SPRINGFIELD	State VA	Zip Code 22152	Transaction ID : SE.4678 Date of Disbursement or Obligation		
Purpose of Expenditure Live Calls		Category/Type 004	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,			<input checked="" type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought 203809.07			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee LANDMARK STRATEGIES			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination		<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>
Mailing Address 8741 CENTER RD			Amount		<div style="border: 1px solid black; padding: 2px; text-align: right;">922.58</div>
City SPRINGFIELD	State VA	Zip Code 22152	Transaction ID : SE.4733 Date of Disbursement or Obligation		
Purpose of Expenditure Live Calls		Category/Type 004	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,			<input checked="" type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought 205472.34			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;">922.58</div>		
(a) SUBTOTAL of Unitemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
(a) TOTAL Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature HICKEY, BRIAN, E, Mr.,		[Electronically Filed]		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">12</div> <div style="border: 1px solid black; padding: 2px;">07</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ C C00624817	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">M</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">M</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">M</div></div> <div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">D</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">D</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">D</div></div> <div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div></div> </div>	
Full Name of Payee LANDMARK STRATEGIES			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"><div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">M</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">M</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">M</div></div><div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">D</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">D</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">D</div></div><div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div></div></div> <div style="display: flex; justify-content: space-between;"><div>10</div><div>30</div><div>2016</div></div>
Mailing Address 8741 CENTER RD			Amount <div style="border: 1px solid black; width: 100%; height: 20px; text-align: right;">1529.32</div>		Transaction ID : SE.4812
City SPRINGFIELD	State VA	Zip Code 22152			
Purpose of Expenditure Live Calls		Category/Type <div style="border: 1px solid black; width: 40px; text-align: center;">004</div>		Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"><div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">M</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">M</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">M</div></div><div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">D</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">D</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">D</div></div><div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div></div></div> <div style="display: flex; justify-content: space-between;"><div>10</div><div>30</div><div>2016</div></div>	
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: _____
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; width: 150px; text-align: right;">364882.41</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee LANDMARK STRATEGIES			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"><div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">M</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">M</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">M</div></div><div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">D</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">D</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">D</div></div><div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div></div></div> <div style="display: flex; justify-content: space-between;"><div>11</div><div>01</div><div>2016</div></div>
Mailing Address 8741 CENTER RD			Amount <div style="border: 1px solid black; width: 100%; height: 20px; text-align: right;">3225.49</div>		Transaction ID : SE.4834
City SPRINGFIELD	State VA	Zip Code 22152			
Purpose of Expenditure Live Calls		Category/Type <div style="border: 1px solid black; width: 40px; text-align: center;">004</div>		Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"><div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">M</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">M</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">M</div></div><div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">D</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">D</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">D</div></div><div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div></div></div> <div style="display: flex; justify-content: space-between;"><div>11</div><div>01</div><div>2016</div></div>	
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: _____
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; width: 150px; text-align: right;">386359.37</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
<div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="width: 60%;"> <p>(a) SUBTOTAL of Itemized Independent Expenditures</p> <p>(a) SUBTOTAL of Unitemized Independent Expenditures</p> <p>(a) TOTAL Independent Expenditures</p> </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; width: 100%; height: 20px; text-align: right;">0.00</div> <div style="border: 1px solid black; width: 100%; height: 20px; text-align: right;"></div> <div style="border: 1px solid black; width: 100%; height: 20px; text-align: right;"></div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
HICKEY, BRIAN, E, Mr., _____ Signature			[Electronically Filed]		Date <div style="display: flex; justify-content: space-between;"><div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">M</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">M</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">M</div></div><div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">D</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">D</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">D</div></div><div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div></div></div> <div style="display: flex; justify-content: space-between;"><div>12</div><div>07</div><div>2016</div></div>

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS		FEC IDENTIFICATION NUMBER ▼ C C00624817	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee LANDMARK STRATEGIES <input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 02 / 2016	
Mailing Address 8741 CENTER RD		Amount 2980.13	
City SPRINGFIELD	State VA	Zip Code 22152	Transaction ID : SE.4849
Purpose of Expenditure Live Calls		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 11 / 02 / 2016
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought 402767.51		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee LANDMARK STRATEGIES <input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 03 / 2016	
Mailing Address 8741 CENTER RD		Amount 3348.46	
City SPRINGFIELD	State VA	Zip Code 22152	Transaction ID : SE.4873
Purpose of Expenditure Live Calls		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 11 / 03 / 2016
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought 417400.20		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(a) SUBTOTAL of Unitemized Independent Expenditures			
(a) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature <i>HICKEY, BRIAN, E, Mr.,</i>		Date M M / D D / Y Y Y Y Y Y 12 / 07 / 2016	
[Electronically Filed]			

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS		FEC IDENTIFICATION NUMBER ▼ C C00624817	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee LANDMARK STRATEGIES <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y	
Mailing Address 8741 CENTER RD		Amount 9878.88	
City SPRINGFIELD	State VA	Zip Code 22152	Transaction ID : SE.4958
Purpose of Expenditure Live Calls		Category/Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 11 / 04 / 2016
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President State: _____	
Calendar Year-To-Date Per Election for Office Sought 437822.62		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee LANDMARK STRATEGIES <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y	
Mailing Address 8741 CENTER RD		Amount 6328.60	
City SPRINGFIELD	State VA	Zip Code 22152	Transaction ID : SE.4959
Purpose of Expenditure Live Calls		Category/Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 11 / 04 / 2016
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President State: _____	
Calendar Year-To-Date Per Election for Office Sought 444151.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures		16207.48	
(a) SUBTOTAL of Unitemized Independent Expenditures			
(a) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
HICKEY, BRIAN, E, Mr., Signature		[Electronically Filed] Date M M / D D / Y Y Y Y Y Y 12 / 07 / 2016	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item LANDMARK STRATEGIES		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 11 / 06 / 2016 </div>	
Mailing Address 8741 CENTER RD		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 6412.50 </div>	
City SPRINGFIELD	State VA	Zip Code 22152	Transaction ID : SE.4903 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 11 / 06 / 2016 </div>
Purpose of Expenditure Live Calls		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 463463.36 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____	

Full Name of Payee <input type="checkbox"/> Memo Item LANDMARK STRATEGIES		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>	
Mailing Address 8741 CENTER RD		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 6412.50 </div>	
City SPRINGFIELD	State VA	Zip Code 22152	Transaction ID : SE.4964 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 11 / 09 / 2016 </div>
Purpose of Expenditure Live Calls		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 474006.88 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 6412.50 </div>
(a) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div>
(a) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 6412.50 </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

Signature

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 12 / 07 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <div style="float: right;"> New report <input type="checkbox"/> Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div> </div>					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item LOOKOUT MEDIA			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 28 / 2016 </div>		
Mailing Address PO BOX 33341			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 9584.33 </div>		
City WASHINGTON	State DC	Zip Code 20033	Transaction ID : SE.4750 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 28 / 2016 </div>		
Purpose of Expenditure VIDEO SHOOT - SUPREME COURT		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>			
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 325501.86 </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <input checked="" type="checkbox"/> Memo Item LOOKOUT MEDIA			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 28 / 2016 </div>		
Mailing Address PO BOX 33341			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 6680.08 </div>		
City WASHINGTON	State DC	Zip Code 20033	Transaction ID : SE.4752 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 28 / 2016 </div>		
Purpose of Expenditure VIDEO SHOOT - DECISION TIME		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>			
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 332181.94 </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div>		
(a) SUBTOTAL of Unitemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>		
(a) TOTAL Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature HICKEY, BRIAN, E, Mr.,		[Electronically Filed]		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 12 / 07 / 2016 </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 15%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 15%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 70%;">Y Y Y Y Y Y</div> </div>					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item LOOKOUT MEDIA				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 15%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 15%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 70%;">Y Y Y Y Y Y</div> </div>	
Mailing Address PO BOX 33341				Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">6680.08</div>	
City WASHINGTON		State DC		Zip Code 20033	
Purpose of Expenditure VIDEO SHOOT - DECISION TIME				Category/Type <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">004</div>	
Name of Federal Candidate: TRUMP, DONALD J., , , <div style="display: flex; justify-content: flex-end; align-items: center;"> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose </div>				Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; width: 150px; text-align: right;">338862.02</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item LOOKOUT MEDIA				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 15%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 15%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 70%;">Y Y Y Y Y Y</div> </div>	
Mailing Address PO BOX 33341				Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">3746.85</div>	
City WASHINGTON		State DC		Zip Code 20033	
Purpose of Expenditure VIDEO SHOOT - SUPREME COURT				Category/Type <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">004</div>	
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, , <div style="display: flex; justify-content: flex-end; align-items: center;"> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose </div>				Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; width: 150px; text-align: right;">345101.72</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (a) SUBTOTAL of Itemized Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">0.00</div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (a) SUBTOTAL of Unitemized Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (a) TOTAL Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u>				Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 15%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 15%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 70%;">Y Y Y Y Y Y</div> </div>	
[Electronically Filed]				Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 15%;">12</div> <div style="border: 1px solid black; padding: 2px; width: 15%;">07</div> <div style="border: 1px solid black; padding: 2px; width: 70%;">2016</div> </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS		FEC IDENTIFICATION NUMBER ▼ C C00624817	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee LOOKOUT MEDIA <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y	
Mailing Address PO BOX 33341		Amount 26691.34	
City WASHINGTON	State DC	Zip Code 20033	Transaction ID : SE.4962
Purpose of Expenditure Video Commercials		Category/Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 11 / 04 / 2016
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President State: _____	
Calendar Year-To-Date Per Election for Office Sought 444151.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee MOSAIC <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 28 / 2016	
Mailing Address 4801 VIEWPOINT PLACE		Amount 61374.00	
City CHEVERLY	State MD	Zip Code 20781	Transaction ID : SE.4683
Purpose of Expenditure DIGITAL ADS		Category/Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 28 / 2016
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President State: _____	
Calendar Year-To-Date Per Election for Office Sought 315176.84		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures		88065.34	
(a) SUBTOTAL of Unitemized Independent Expenditures			
(a) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
HICKEY, BRIAN, E, Mr., Signature		[Electronically Filed] Date M M / D D / Y Y Y Y Y Y 12 / 07 / 2016	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS		FEC IDENTIFICATION NUMBER ▼ C C00624817	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name of Payee THOMPSON RYER <input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 20 / 2016	
Mailing Address 2120 L Street, NW, #305.		Amount 740.71	
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4404
Purpose of Expenditure Door Hangers		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 20 / 2016
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought 119255.75		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee THOMPSON RYER <input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 20 / 2016	
Mailing Address 2120 L Street, NW, #305.		Amount 106.45	
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4407
Purpose of Expenditure Door Hangers		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 20 / 2016
Name of Federal Candidate: DRISKELL, GRETCHEN, , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: <u>07</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>MI</u>	
Calendar Year-To-Date Per Election for Office Sought 2255.26		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(a) SUBTOTAL of Unitemized Independent Expenditures	
(a) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,
Signature
[Electronically Filed]
Date M M / D D / Y Y Y Y Y Y
12 / 07 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 88 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 31829.21 </div>	
City Washington	State DC	Zip Code 20037		
Purpose of Expenditure Postage / Production Mail Pieces		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">119255.75</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 455.48 </div>	
City Washington	State DC	Zip Code 20037		
Purpose of Expenditure Postage / Production Mail Pieces		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		
Name of Federal Candidate: HASSAN, MARGARET WOOD, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NH</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">8196.42</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	0.00
(a) SUBTOTAL of Unitemized Independent Expenditures	▶	
(a) TOTAL Independent Expenditures	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS		FEC IDENTIFICATION NUMBER ▼ C C00624817	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name of Payee THOMPSON RYER <input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 20 / 2016		
Mailing Address 2120 L Street, NW, #305.		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">455.48</div> Transaction ID : SE.4430 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 20 / 2016		
City Washington	State DC			Zip Code 20037
Purpose of Expenditure Postage / Production Mail Pieces				Category/ Type 004
Name of Federal Candidate: SHEA-PORTER, CAROL, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President <input type="checkbox"/> State: NH		
Calendar Year-To-Date Per Election for Office Sought 1345.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee THOMPSON RYER <input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 20 / 2016		
Mailing Address 2120 L Street, NW, #305.		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">457.39</div> Transaction ID : SE.4432 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 20 / 2016		
City Washington	State DC			Zip Code 20037
Purpose of Expenditure Postage / Production Mail Pieces				Category/ Type 004
Name of Federal Candidate: DRISKELL, GRETCHEN, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 07 <input type="checkbox"/> President <input type="checkbox"/> State: MI		
Calendar Year-To-Date Per Election for Office Sought 2255.26		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(a) SUBTOTAL of Unitemized Independent Expenditures	
(a) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,
Signature
[Electronically Filed]
Date M M / D D / Y Y Y Y Y Y
12 / 07 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 90 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 20 / 2016 </div>	
Mailing Address 2120 L Street, NW, #305.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 728.79 </div>	
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4433 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 20 / 2016 </div>
Purpose of Expenditure Postage / Production Mail Pieces		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: MASTO, CATHERINE CORTEZ, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">13990.23</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 20 / 2016 </div>	
Mailing Address 2120 L Street, NW, #305.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 184.59 </div>	
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4434 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 20 / 2016 </div>
Purpose of Expenditure Postage / Production Mail Pieces		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: TITUS, DINA, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">870.67</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(a) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

Signature

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 12 / 07 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 91 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>							
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on MM / DD / YYYY											
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER				Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 20 / 2016							
Mailing Address 2120 L Street, NW, #305.				Amount 216.53							
City Washington		State DC		Zip Code 20037							
Purpose of Expenditure Postage / Production Mail Pieces				Category/Type 004							
Name of Federal Candidate: KIHUEN, RUBEN, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV							
Calendar Year-To-Date Per Election for Office Sought 248.39				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶							
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER				Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 20 / 2016							
Mailing Address 2120 L Street, NW, #305.				Amount 327.67							
City Washington		State DC		Zip Code 20037							
Purpose of Expenditure Postage / Production Mail Pieces				Category/Type 004							
Name of Federal Candidate: ROSEN, JACKY, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV							
Calendar Year-To-Date Per Election for Office Sought 1302.94				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶							
<table style="width:100%;"> <tr> <td style="width:60%;">(a) SUBTOTAL of Itemized Independent Expenditures</td> <td style="width:40%; text-align: right;">▶ 0.00</td> </tr> <tr> <td>(a) SUBTOTAL of Unitemized Independent Expenditures</td> <td style="text-align: right;">▶ </td> </tr> <tr> <td>(a) TOTAL Independent Expenditures</td> <td style="text-align: right;">▶ </td> </tr> </table>						(a) SUBTOTAL of Itemized Independent Expenditures	▶ 0.00	(a) SUBTOTAL of Unitemized Independent Expenditures	▶ 	(a) TOTAL Independent Expenditures	▶
(a) SUBTOTAL of Itemized Independent Expenditures	▶ 0.00										
(a) SUBTOTAL of Unitemized Independent Expenditures	▶ 										
(a) TOTAL Independent Expenditures	▶ 										
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.											
Signature <u>HICKEY, BRIAN, E, Mr.,</u>				Date MM / DD / YYYY 12 / 07 / 2016							

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 92 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS		FEC IDENTIFICATION NUMBER ▼ C C00624817	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name of Payee THOMPSON RYER <input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 20 / 2016	
Mailing Address 2120 L Street, NW, #305.		Amount 106.45	
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4613
Purpose of Expenditure Door Hangers		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 20 / 2016
Name of Federal Candidate: HASSAN, MARGARET WOOD, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate District: _____ State: NH	
Calendar Year-To-Date Per Election for Office Sought 8196.42		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee THOMPSON RYER <input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 20 / 2016	
Mailing Address 2120 L Street, NW, #305.		Amount 17.74	
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4614
Purpose of Expenditure Door Hangers		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 20 / 2016
Name of Federal Candidate: SHEA-PORTER, CAROL, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 01 State: NH	
Calendar Year-To-Date Per Election for Office Sought 1363.57		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(a) SUBTOTAL of Unitemized Independent Expenditures	
(a) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

Signature

[Electronically Filed]

Date M M / D D / Y Y Y Y Y Y
12 / 07 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 93 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report <input type="checkbox"/> Amends report filed on <input type="text"/> / <input type="text"/> / <input type="text"/>	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">127.40</div>		
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4615 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Purpose of Expenditure Door Hangers		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	<input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: MASTO, CATHERINE CORTEZ, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate District: _____ State: NV		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">13990.23</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.88</div>		
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4616 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Purpose of Expenditure Door Hangers		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	<input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: TITUS, DINA, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 01 State: NV		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">874.55</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(a) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

Signature

[Electronically Filed]

Date / /

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 94 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">8.64</div>		
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4617 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure Door Hangers		Category/ Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: ROSEN, JACKY, , ,			<div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose </div> <div> Office Sought: <input checked="" type="checkbox"/> House District: <u>03</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NV</u> </div> </div>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">1302.94</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">5.31</div>		
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4618 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure Door Hangers		Category/ Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: KIHUEN, RUBEN, , ,			<div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose </div> <div> Office Sought: <input checked="" type="checkbox"/> House District: <u>04</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NV</u> </div> </div>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">248.39</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>		
(a) SUBTOTAL of Unitemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
(a) TOTAL Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u>		[Electronically Filed]		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 95 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 400px;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
Mailing Address 2120 L Street, NW, #305.				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">740.71</div>	
City Washington		State DC		Zip Code 20037	
Purpose of Expenditure Door Hangers				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,				Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought				<div style="border: 1px solid black; padding: 2px; text-align: right;">128886.15</div>	
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
Mailing Address 2120 L Street, NW, #305.				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">106.45</div>	
City Washington		State DC		Zip Code 20037	
Purpose of Expenditure Door Hangers				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: DRISKELL, GRETCHEN, ,				Office Sought: <input checked="" type="checkbox"/> House District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MI	
Calendar Year-To-Date Per Election for Office Sought				<div style="border: 1px solid black; padding: 2px; text-align: right;">4510.52</div>	
Name of Federal Candidate: DRISKELL, GRETCHEN, ,				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (a) SUBTOTAL of Itemized Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (a) SUBTOTAL of Unitemized Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (a) TOTAL Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u>				Date <div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
[Electronically Filed]				Date <div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">12</div> / <div style="border: 1px solid black; padding: 2px;">07</div> / <div style="border: 1px solid black; padding: 2px;">2016</div></div> </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 96 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on MM / DD / YYYY					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER				Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 21 / 2016	
Mailing Address 2120 L Street, NW, #305.				Amount 996.24	
City Washington		State DC		Zip Code 20037	
Purpose of Expenditure Door Hangers				Category/Type 004	
Name of Federal Candidate: TITUS, DINA, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought 996.24				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER				Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 21 / 2016	
Mailing Address 2120 L Street, NW, #305.				Amount 5.31	
City Washington		State DC		Zip Code 20037	
Purpose of Expenditure Door Hangers				Category/Type 004	
Name of Federal Candidate: KIHUEN, RUBEN, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought 253.70				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures				0.00	
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u>				Date MM / DD / YYYY 12 / 07 / 2016	

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 97 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report <input type="checkbox"/> Amends report filed on <input type="text"/> / <input type="text"/> / <input type="text"/>	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address 2120 L Street, NW, #305.			Amount <input type="text"/>		
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4697 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Purpose of Expenditure Door Hangers		Category/ Type <input type="text"/> 004	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: ROSEN, JACKY, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV		
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 4256.73			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address 2120 L Street, NW, #305.			Amount <input type="text"/>		
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4703 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Purpose of Expenditure Door Hangers		Category/ Type <input type="text"/> 004	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: SHEA-PORTER, CAROL, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NH		
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 1510.84			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 0.00
(a) SUBTOTAL of Unitemized Independent Expenditures	<input type="text"/>
(a) TOTAL Independent Expenditures	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

Signature

[Electronically Filed]

Date / /

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 98 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report <input type="checkbox"/> Amends report filed on <input type="text"/>	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><input type="text"/>10<input type="text"/></div> <div><input type="text"/>24<input type="text"/></div> <div><input type="text"/>2016<input type="text"/></div> </div>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">740.71</div>		
City Washington	State DC	Zip Code 20037			
Purpose of Expenditure Door Hangers		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Transaction ID : SE.4402 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><input type="text"/>10<input type="text"/></div> <div><input type="text"/>24<input type="text"/></div> <div><input type="text"/>2016<input type="text"/></div> </div>		
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">134889.12</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ►		

Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><input type="text"/>10<input type="text"/></div> <div><input type="text"/>24<input type="text"/></div> <div><input type="text"/>2016<input type="text"/></div> </div>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">106.45</div>		
City Washington	State DC	Zip Code 20037			
Purpose of Expenditure Door Hangers		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Transaction ID : SE.4403 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><input type="text"/>10<input type="text"/></div> <div><input type="text"/>24<input type="text"/></div> <div><input type="text"/>2016<input type="text"/></div> </div>		
Name of Federal Candidate: DRISKELL, GRETCHEN, ,			Office Sought: <input checked="" type="checkbox"/> House District: <u>07</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>MI</u>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">6872.23</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ►		

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(a) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

Signature

[Electronically Filed]

Date

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07

2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 99 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report <input type="checkbox"/> Amends report filed on <input type="text"/>	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div><input type="text"/>10<input type="text"/></div> <div><input type="text"/>24<input type="text"/></div> <div><input type="text"/>2016<input type="text"/></div> </div>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.88</div>		
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4686 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div><input type="text"/>10<input type="text"/></div> <div><input type="text"/>24<input type="text"/></div> <div><input type="text"/>2016<input type="text"/></div> </div>		
Purpose of Expenditure Door Hangers		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>			
Name of Federal Candidate: TITUS, DINA, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 01 State: NV		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">1000.12</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div><input type="text"/>10<input type="text"/></div> <div><input type="text"/>24<input type="text"/></div> <div><input type="text"/>2016<input type="text"/></div> </div>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">5.31</div>		
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4691 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div><input type="text"/>10<input type="text"/></div> <div><input type="text"/>24<input type="text"/></div> <div><input type="text"/>2016<input type="text"/></div> </div>		
Purpose of Expenditure Door Hangers		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>			
Name of Federal Candidate: KIHUEN, RUBEN, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 04 State: NV		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">259.01</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(a) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

Signature

[Electronically Filed]

Date

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07

2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 100 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 2120 L Street, NW, #305.				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">8.64</div>	
City Washington		State DC		Zip Code 20037	
Purpose of Expenditure Door Hangers				Category/Type <div style="border: 1px solid black; padding: 2px;">004</div>	
Name of Federal Candidate: ROSEN, JACKY, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 03 State: NV	
Calendar Year-To-Date Per Election for Office Sought				<div style="border: 1px solid black; padding: 2px; text-align: right;">4265.37</div>	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶				Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 2120 L Street, NW, #305.				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">17.74</div>	
City Washington		State DC		Zip Code 20037	
Purpose of Expenditure Door Hangers				Category/Type <div style="border: 1px solid black; padding: 2px;">004</div>	
Name of Federal Candidate: SHEA-PORTER, CAROL, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 01 State: NH	
Calendar Year-To-Date Per Election for Office Sought				<div style="border: 1px solid black; padding: 2px; text-align: right;">1528.58</div>	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶				Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>(a) SUBTOTAL of Itemized Independent Expenditures</p> <p>(a) SUBTOTAL of Unitemized Independent Expenditures</p> <p>(a) TOTAL Independent Expenditures</p> </div> <div style="width: 35%;"> <div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div> <div style="border: 1px solid black; padding: 2px; height: 20px;"></div> <div style="border: 1px solid black; padding: 2px; height: 20px;"></div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u>				Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 101 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <input type="text"/> / <input type="text"/> / <input type="text"/>	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 2120 L Street, NW, #305.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">740.70</div>	
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4560 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Purpose of Expenditure Door Hangers		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">147838.46</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ►	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 2120 L Street, NW, #305.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">106.45</div>	
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4561 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Purpose of Expenditure Door Hangers		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: HASSAN, MARGARET WOOD, ,		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NH</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">9562.49</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ►	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(a) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

Signature

[Electronically Filed]

Date / /

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 102 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on				<div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y / / / </div>	

Full Name of Payee THOMPSON RYER			<input checked="" type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 25 / 2016 </div>	
Mailing Address 2120 L Street, NW, #305.				
City Washington	State DC	Zip Code 20037	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 17.74 </div>	
Purpose of Expenditure Door Hangers			Transaction ID : SE.4562 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 25 / 2016 </div>	
Name of Federal Candidate: SHEA-PORTER, CAROL, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <u>01</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NH</u>	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 1756.26 </div>	

Full Name of Payee THOMPSON RYER			<input checked="" type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 25 / 2016 </div>	
Mailing Address 2120 L Street, NW, #305.				
City Washington	State DC	Zip Code 20037	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 106.45 </div>	
Purpose of Expenditure Door Hangers			Transaction ID : SE.4563 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 25 / 2016 </div>	
Name of Federal Candidate: DRISKELL, GRETCHEN, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <u>07</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>MI</u>	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 9233.94 </div>	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div>
(a) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(a) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

Signature

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 12 / 07 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 103 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report <input type="checkbox"/> Amends report filed on <input type="text"/> / <input type="text"/> / <input type="text"/>	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">127.40</div>		
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4564 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Purpose of Expenditure Door Hangers		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	<input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: MASTO, CATHERINE CORTEZ, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate District: _____ State: NV		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">16009.35</div>		

Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">31829.21</div>		
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4580 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Purpose of Expenditure Postage/Production Mailings		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	<input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ State: _____		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">179667.67</div>		

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(a) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,
 Signature

[Electronically Filed]
 Date / /

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 104 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <div style="float: right; text-align: right;"> New report Amends report filed on MM / DD / YYYY </div>			
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> MM / DD / YYYY </div>	
Mailing Address 2120 L Street, NW, #305.		Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> MM / DD / YYYY </div>	
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4581 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> MM / DD / YYYY </div>
Purpose of Expenditure Postage/Production Mailings		Category/Type 004	
Name of Federal Candidate: HASSAN, MARGARET WOOD, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▶	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> MM / DD / YYYY </div>	
Mailing Address 2120 L Street, NW, #305.		Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> MM / DD / YYYY </div>	
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4582 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> MM / DD / YYYY </div>
Purpose of Expenditure Postage/Production Mailings		Category/Type 004	
Name of Federal Candidate: MASTO, CATHERINE CORTEZ, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▶	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> MM / DD / YYYY </div>	
(a) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> MM / DD / YYYY </div>	
(a) TOTAL Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> MM / DD / YYYY </div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature HICKEY, BRIAN, E, Mr.,		Date MM / DD / YYYY	

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 105 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 300px;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
Mailing Address 2120 L Street, NW, #305.				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">457.39</div>	
City Washington		State DC		Zip Code 20037	
Purpose of Expenditure Postage/Production Mailings				Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: DRISKELL, GRETCHEN, , ,				Office Sought: <input checked="" type="checkbox"/> House District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MI	
Calendar Year-To-Date Per Election for Office Sought				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; text-align: right;">9691.33</div>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
Mailing Address 2120 L Street, NW, #305.				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">455.48</div>	
City Washington		State DC		Zip Code 20037	
Purpose of Expenditure Postage/Production Mailings				Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: SHEA-PORTER, CAROL, , ,				Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NH	
Calendar Year-To-Date Per Election for Office Sought				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; text-align: right;">2211.74</div>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
(a) SUBTOTAL of Itemized Independent Expenditures ▶				<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>	
(a) SUBTOTAL of Unitemized Independent Expenditures ▶				<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>	
(a) TOTAL Independent Expenditures ▶				<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
HICKEY, BRIAN, E, Mr., Signature				Date <div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 106 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">184.59</div>		
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4651 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure Postage/Production Mailings		Category/ Type 004	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: TITUS, DINA, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">1184.71</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">327.67</div>		
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4652 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure Postage/Production Mailings		Category/ Type 004	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: ROSEN, JACKY, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">4593.04</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>		
(a) SUBTOTAL of Unitemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
(a) TOTAL Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u>		<u>[Electronically Filed]</u>		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 107 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">25</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Mailing Address 2120 L Street, NW, #305.				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">216.53</div>	
City Washington		State DC		Zip Code 20037	
Purpose of Expenditure Postage/Production Mailings				Category/Type <div style="border: 1px solid black; padding: 2px;">004</div>	
Name of Federal Candidate: ROSEN, JACKY, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 04 State: NV	
Calendar Year-To-Date Per Election for Office Sought				<div style="border: 1px solid black; padding: 2px; text-align: right;">475.54</div>	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶				Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">25</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">25</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Mailing Address 2120 L Street, NW, #305.				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">3.88</div>	
City Washington		State DC		Zip Code 20037	
Purpose of Expenditure Door Hangers				Category/Type <div style="border: 1px solid black; padding: 2px;">004</div>	
Name of Federal Candidate: TITUS, DINA, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 01 State: NV	
Calendar Year-To-Date Per Election for Office Sought				<div style="border: 1px solid black; padding: 2px; text-align: right;">1188.59</div>	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶				Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">25</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
<div style="display: flex; justify-content: space-between;"> <div> (a) SUBTOTAL of Itemized Independent Expenditures </div> <div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div> (a) SUBTOTAL of Unitemized Independent Expenditures </div> <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div> (a) TOTAL Independent Expenditures </div> <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u>				Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">12</div> <div style="border: 1px solid black; padding: 2px;">07</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 108 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 2120 L Street, NW, #305.				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">5.31</div>	
City Washington		State DC		Zip Code 20037	
Purpose of Expenditure Door Hangers				Category/Type <div style="border: 1px solid black; padding: 2px;">004</div>	
Name of Federal Candidate: KIHUEN, RUBEN, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 04 State: NV	
Calendar Year-To-Date Per Election for Office Sought				<div style="border: 1px solid black; padding: 2px; text-align: right;">480.85</div>	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶				Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 2120 L Street, NW, #305.				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">8.64</div>	
City Washington		State DC		Zip Code 20037	
Purpose of Expenditure Door Hangers				Category/Type <div style="border: 1px solid black; padding: 2px;">004</div>	
Name of Federal Candidate: ROSEN, JACKY, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 03 State: NV	
Calendar Year-To-Date Per Election for Office Sought				<div style="border: 1px solid black; padding: 2px; text-align: right;">4702.85</div>	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶				Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (a) SUBTOTAL of Itemized Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (a) SUBTOTAL of Unitemized Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (a) TOTAL Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u>				Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 109 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 400px;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
Mailing Address 2120 L Street, NW, #305.				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">740.69</div>	
City Washington		State DC		Zip Code 20037	
Purpose of Expenditure Door Hangers				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,				Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
Mailing Address 2120 L Street, NW, #305.				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">106.45</div>	
City Washington		State DC		Zip Code 20037	
Purpose of Expenditure Door Hangers				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: HASSAN, MARGARET WOOD, ,				Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NH</u>	
Calendar Year-To-Date Per Election for Office Sought				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<div style="display: flex; justify-content: space-between;"> <div> (a) SUBTOTAL of Itemized Independent Expenditures </div> <div style="border: 1px solid black; padding: 2px; text-align: right; width: 150px;">0.00</div> </div>					
<div style="display: flex; justify-content: space-between;"> <div> (a) SUBTOTAL of Unitemized Independent Expenditures </div> <div style="border: 1px solid black; padding: 2px; text-align: right; width: 150px;"></div> </div>					
<div style="display: flex; justify-content: space-between;"> <div> (a) TOTAL Independent Expenditures </div> <div style="border: 1px solid black; padding: 2px; text-align: right; width: 150px;"></div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u>				Date <div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
[Electronically Filed]					

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 110 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 400px;"> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
Mailing Address 2120 L Street, NW, #305.				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">106.45</div>	
City Washington		State DC		Zip Code 20037	
Purpose of Expenditure Door Hangers				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: DRISKELL, GRETCHEN, , ,				Office Sought: <input checked="" type="checkbox"/> House District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MI	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">11813.15</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
Mailing Address 2120 L Street, NW, #305.				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">127.40</div>	
City Washington		State DC		Zip Code 20037	
Purpose of Expenditure Door Hangers				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: MASTO, CATHERINE CORTEZ, , ,				Office Sought: <input type="checkbox"/> House District: <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">17873.71</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (a) SUBTOTAL of Itemized Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> (a) SUBTOTAL of Unitemized Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> (a) TOTAL Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u>				Date <div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
[Electronically Filed]				12 / 07 / 2016	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 111 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS		FEC IDENTIFICATION NUMBER ▼ C C00624817	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name of Payee THOMPSON RYER <input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 26 / 2016	
Mailing Address 2120 L Street, NW, #305.		Amount 3.88	
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4688
Purpose of Expenditure Door Hangers		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 26 / 2016
Name of Federal Candidate: TITUS, DINA, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <u>01</u> State: <u>NV</u>	
Calendar Year-To-Date Per Election for Office Sought 1192.47		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee THOMPSON RYER <input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 26 / 2016	
Mailing Address 2120 L Street, NW, #305.		Amount 5.31	
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4693
Purpose of Expenditure Door Hangers		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 26 / 2016
Name of Federal Candidate: KIHUEN, RUBEN, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <u>04</u> State: <u>NV</u>	
Calendar Year-To-Date Per Election for Office Sought 486.16		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(a) SUBTOTAL of Unitemized Independent Expenditures	
(a) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

Signature

[Electronically Filed]

Date M M / D D / Y Y Y Y Y Y
12 / 07 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 112 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS		FEC IDENTIFICATION NUMBER ▼ C C00624817	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <input type="text" value="MM/DD/YYYY"/>	

Full Name of Payee THOMPSON RYER <input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <input type="text" value="MM/DD/YYYY"/> 10 / 26 / 2016	
Mailing Address 2120 L Street, NW, #305.		Amount <input type="text" value="00000000.00"/> 8.64	
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4700
Purpose of Expenditure Door Hangers		Category/ Type <input type="text" value="004"/>	Date of Disbursement or Obligation <input type="text" value="MM/DD/YYYY"/> 10 / 26 / 2016
Name of Federal Candidate: ROSEN, JACKY, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 03 State: NV	
Calendar Year-To-Date Per Election for Office Sought <input type="text" value="00000000.00"/> 4812.66		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee THOMPSON RYER <input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <input type="text" value="MM/DD/YYYY"/> 10 / 26 / 2016	
Mailing Address 2120 L Street, NW, #305.		Amount <input type="text" value="00000000.00"/> 17.74	
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4707
Purpose of Expenditure Door Hangers		Category/ Type <input type="text" value="004"/>	Date of Disbursement or Obligation <input type="text" value="MM/DD/YYYY"/> 10 / 26 / 2016
Name of Federal Candidate: SHEA-PORTER, CAROL, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 01 State: NH	
Calendar Year-To-Date Per Election for Office Sought <input type="text" value="00000000.00"/> 2502.19		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text" value="00000000.00"/> 0.00
(a) SUBTOTAL of Unitemized Independent Expenditures	<input type="text" value="00000000.00"/>
(a) TOTAL Independent Expenditures	<input type="text" value="00000000.00"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr., _____ Signature	[Electronically Filed]	Date <input type="text" value="MM/DD/YYYY"/> 12 / 07 / 2016
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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 113 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">3.88</div>		
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4689 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>		
Purpose of Expenditure Door Hangers		Category/ Type <div style="border: 1px solid black; padding: 2px;">004</div>	<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>		
Name of Federal Candidate: TITUS, DINA, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">1196.35</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">5.31</div>		
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4694 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>		
Purpose of Expenditure Door Hangers		Category/ Type <div style="border: 1px solid black; padding: 2px;">004</div>	<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>		
Name of Federal Candidate: KIHUEN, RUBEN, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">491.47</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>		
(a) SUBTOTAL of Unitemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
(a) TOTAL Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u>		<u>[Electronically Filed]</u>		Date <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on MM / DD / YYYY					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER				Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 27 / 2016	
Mailing Address 2120 L Street, NW, #305.				Amount 8.64	
City Washington		State DC		Zip Code 20037	
Purpose of Expenditure Door Hangers				Category/Type 004	
Name of Federal Candidate: ROSEN, JACKY, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought 4922.47				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER				Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 27 / 2016	
Mailing Address 2120 L Street, NW, #305.				Amount 17.74	
City Washington		State DC		Zip Code 20037	
Purpose of Expenditure Door Hangers				Category/Type 004	
Name of Federal Candidate: SHEA-PORTER, CAROL, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NH	
Calendar Year-To-Date Per Election for Office Sought 2792.64				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures				0.00	
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u>				Date MM / DD / YYYY 12 / 07 / 2016	
<i>[Electronically Filed]</i>					

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">106.45</div>		
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4715 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>		
Purpose of Expenditure Door Hangers		Category/ Type <div style="border: 1px solid black; padding: 2px;">004</div>	<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>		
Name of Federal Candidate: DRISKELL, GRETCHEN, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MI		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">13934.97</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">106.45</div>		
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4716 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>		
Purpose of Expenditure Door Hangers		Category/ Type <div style="border: 1px solid black; padding: 2px;">004</div>	<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>		
Name of Federal Candidate: HASSAN, MARGARET WOOD, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NH		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">13503.41</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>		
(a) SUBTOTAL of Unitemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
(a) TOTAL Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u>		[Electronically Filed]		Date <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on		<div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y / / / </div>	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 27 / 2016 </div>	
Mailing Address 2120 L Street, NW, #305.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 127.40 </div>	
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4717 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 27 / 2016 </div>
Purpose of Expenditure Door Hangers		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: MASTO, CATHERINE CORTEZ, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NV</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">19009.28</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 27 / 2016 </div>	
Mailing Address 2120 L Street, NW, #305.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 740.69 </div>	
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4718 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 27 / 2016 </div>
Purpose of Expenditure Door Hangers		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">204549.76</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures ▶		<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>	
(a) SUBTOTAL of Unitemized Independent Expenditures ▶		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
(a) TOTAL Independent Expenditures ▶		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature <u>HICKEY, BRIAN, E, Mr.,</u>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 12 / 07 / 2016 </div>	
[Electronically Filed]			

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS		FEC IDENTIFICATION NUMBER ▼ C C00624817	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee THOMPSON RYER <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 27 / 2016	
Mailing Address 2120 L Street, NW, #305.		Amount 48330.50	
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4737
Purpose of Expenditure POSTAGE		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 27 / 2016
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 253802.84		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee THOMPSON RYER <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 27 / 2016	
Mailing Address 2120 L Street, NW, #305.		Amount 710.67	
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4738
Purpose of Expenditure POSTAGE		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 27 / 2016
Name of Federal Candidate: DRISKELL, GRETCHEN, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>07</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>MI</u>
Calendar Year-To-Date Per Election for Office Sought 14645.64		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures		49041.17	
(a) SUBTOTAL of Unitemized Independent Expenditures			
(a) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
HICKEY, BRIAN, E, Mr., Signature		[Electronically Filed] Date M M / D D / Y Y Y Y Y Y 12 / 07 / 2016	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>	

Full Name of Payee <input type="checkbox"/> Memo Item THOMPSON RYER		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 27 / 2016 </div>	
Mailing Address 2120 L Street, NW, #305.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 732.29 </div>	
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4739 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 27 / 2016 </div>
Purpose of Expenditure POSTAGE		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: HASSAN, MARGARET WOOD, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate District: _____ State: NH	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 14235.70 </div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input type="checkbox"/> Memo Item THOMPSON RYER		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>	
Mailing Address 2120 L Street, NW, #305.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 1033.28 </div>	
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4743 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 27 / 2016 </div>
Purpose of Expenditure POSTAGE		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: MASTO, CATHERINE CORTEZ, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate District: _____ State: NV	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 20042.56 </div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 1765.57 </div>
(a) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div>
(a) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 1765.57 </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,
 Signature

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 12 / 07 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Full Name of Payee <input type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">732.29</div>		
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4744 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure POSTAGE		Category/ Type <div style="border: 1px solid black; padding: 2px;">004</div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: SHEA-PORTER, CAROL, , ,			<input checked="" type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NV</u>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">20774.85</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <input type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">245.96</div>		
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4745 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure POSTAGE		Category/ Type <div style="border: 1px solid black; padding: 2px;">004</div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: TITUS, DINA, , ,			<input checked="" type="checkbox"/> Support Office Sought: <input checked="" type="checkbox"/> House District: <u>01</u> <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NV</u>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">1442.31</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures ▶			<div style="border: 1px solid black; padding: 2px; text-align: right;">978.25</div>		
(a) SUBTOTAL of Unitemized Independent Expenditures ▶			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
(a) TOTAL Independent Expenditures ▶			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature HICKEY, BRIAN, E, Mr.,		[Electronically Filed]		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>	
Full Name of Payee <input type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">488.52</div>		
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4746 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>		
Purpose of Expenditure POSTAGE		Category/ Type 004	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>		
Name of Federal Candidate: ROSEN, JACKY, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">5410.99</div>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <input type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">298.80</div>		
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4747 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>		
Purpose of Expenditure POSTAGE		Category/ Type 004	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>		
Name of Federal Candidate: KIHUEN, RUBEN, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">790.27</div>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;">787.32</div>		
(a) SUBTOTAL of Unitemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
(a) TOTAL Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature HICKEY, BRIAN, E, Mr.,		[Electronically Filed]		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 121 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report <input type="checkbox"/> Amends report filed on <input type="text"/>	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><input type="text"/>10<input type="text"/></div> <div><input type="text"/>28<input type="text"/></div> <div><input type="text"/>2016<input type="text"/></div> </div>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.88</div>		
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4695 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><input type="text"/>10<input type="text"/></div> <div><input type="text"/>28<input type="text"/></div> <div><input type="text"/>2016<input type="text"/></div> </div>		
Purpose of Expenditure Door Hangers		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>			
Name of Federal Candidate: TITUS, DINA, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 01 State: NV		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">1446.19</div>		

Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><input type="text"/>10<input type="text"/></div> <div><input type="text"/>28<input type="text"/></div> <div><input type="text"/>2016<input type="text"/></div> </div>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">5.31</div>		
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4696 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><input type="text"/>10<input type="text"/></div> <div><input type="text"/>28<input type="text"/></div> <div><input type="text"/>2016<input type="text"/></div> </div>		
Purpose of Expenditure Door Hangers		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>			
Name of Federal Candidate: KIHUEN, RUBEN, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 04 State: NV		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">795.58</div>		

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(a) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

Signature

[Electronically Filed]

Date

12

07

2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 122 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">8.64</div>		
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4702 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure Door Hangers		Category/ Type <div style="border: 1px solid black; padding: 2px;">004</div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: ROSEN, JACKY, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">5419.63</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">17.74</div>		
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4710 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure Door Hangers		Category/ Type <div style="border: 1px solid black; padding: 2px;">004</div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: SHEA-PORTER, CAROL, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NH		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">2810.38</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>		
(a) SUBTOTAL of Unitemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
(a) TOTAL Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u>		[Electronically Filed]		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <div style="float: right; text-align: right;"> New report Amends report filed on MM / DD / YYYY </div>					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY 10 / 28 / 2016 </div>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 106.45 </div>		
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4723 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY 10 / 28 / 2016 </div>		
Purpose of Expenditure Door Hangers		Category/ Type 004			
Name of Federal Candidate: DRISKELL, GRETCHEN, , ,			<input checked="" type="checkbox"/> Support Office Sought: <input checked="" type="checkbox"/> House District: 07 <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate State: MI		
Calendar Year-To-Date Per Election for Office Sought 14752.09			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY 10 / 28 / 2016 </div>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 106.45 </div>		
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4724 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY 10 / 28 / 2016 </div>		
Purpose of Expenditure Door Hangers		Category/ Type 004			
Name of Federal Candidate: HASSAN, MARGARET WOOD, , ,			<input checked="" type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NH		
Calendar Year-To-Date Per Election for Office Sought 14342.15			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div>		
(a) SUBTOTAL of Unitemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div>		
(a) TOTAL Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u>		[Electronically Filed]		Date MM / DD / YYYY 12 / 07 / 2016	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on		<div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y / / / </div>	

Full Name of Payee THOMPSON RYER <input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 28 / 2016 </div>	
Mailing Address 2120 L Street, NW, #305.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 127.40 </div>	
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4725
Purpose of Expenditure Door Hangers		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 28 / 2016 </div>
Name of Federal Candidate: MASTO, CATHERINE CORTEZ, , ,		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">20902.25</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee THOMPSON RYER <input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 28 / 2016 </div>	
Mailing Address 2120 L Street, NW, #305.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 740.69 </div>	
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4726
Purpose of Expenditure Door Hangers		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 28 / 2016 </div>
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">315917.53</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(a) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

Signature

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 12 / 07 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS		FEC IDENTIFICATION NUMBER ▼ C C00624817	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name of Payee THOMPSON RYER <input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 28 / 2016	
Mailing Address 2120 L Street, NW, #305.		Amount 15758.52	
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4794
Purpose of Expenditure Production Mailings		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 28 / 2016
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought 360860.24		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee THOMPSON RYER <input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 28 / 2016	
Mailing Address 2120 L Street, NW, #305.		Amount 211.38	
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4798
Purpose of Expenditure Production Mailings		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 28 / 2016
Name of Federal Candidate: HASSAN, MARGARET WOOD, , ,		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NH	
Calendar Year-To-Date Per Election for Office Sought 15799.96		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(a) SUBTOTAL of Unitemized Independent Expenditures	
(a) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

Signature

[Electronically Filed]

Date M M / D D / Y Y Y Y Y Y
12 / 07 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <div style="float: right;"> New report Amends report filed on MM / DD / YYYY </div>					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016		
Mailing Address 2120 L Street, NW, #305.			Amount 102.60		
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4799 Date of Disbursement or Obligation MM / DD / YYYY 10 / 28 / 2016		
Purpose of Expenditure Production Mailings		Category/ Type 004			
Name of Federal Candidate: MASTO, CATHERINE CORTEZ, , ,			<input checked="" type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV		
Calendar Year-To-Date Per Election for Office Sought 21004.85			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016		
Mailing Address 2120 L Street, NW, #305.			Amount 164.83		
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4800 Date of Disbursement or Obligation MM / DD / YYYY 10 / 28 / 2016		
Purpose of Expenditure Production Mailings		Category/ Type 004			
Name of Federal Candidate: ROSEN, JACKY, , ,			<input checked="" type="checkbox"/> Support Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV		
Calendar Year-To-Date Per Election for Office Sought 960.41			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			0.00		
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u>		[Electronically Filed]		Date MM / DD / YYYY 12 / 07 / 2016	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 127 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <div style="float: right; text-align: right;"> New report Amends report filed on MM / DD / YYYY </div>					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016		
Mailing Address 2120 L Street, NW, #305.			Amount 102.60		
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4801 Date of Disbursement or Obligation MM / DD / YYYY 10 / 28 / 2016		
Purpose of Expenditure Production Mailings		Category/ Type 004			
Name of Federal Candidate: TITUS, DINA, , ,			<input checked="" type="checkbox"/> Support Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV		
Calendar Year-To-Date Per Election for Office Sought 1548.79			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016		
Mailing Address 2120 L Street, NW, #305.			Amount 220.50		
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4802 Date of Disbursement or Obligation MM / DD / YYYY 10 / 28 / 2016		
Purpose of Expenditure Production Mailings		Category/ Type 004			
Name of Federal Candidate: DRISKELL, GRETCHEN, , ,			<input checked="" type="checkbox"/> Support Office Sought: <input checked="" type="checkbox"/> House District: 07 <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate State: MI		
Calendar Year-To-Date Per Election for Office Sought 14972.59			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			0.00		
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u>		[Electronically Filed]		Date MM / DD / YYYY 12 / 07 / 2016	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 128 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <div style="float: right; text-align: right;"> New report Amends report filed on MM / DD / YYYY </div>					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016		
Mailing Address 2120 L Street, NW, #305.			Amount 211.38		
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4803 Date of Disbursement or Obligation MM / DD / YYYY 10 / 28 / 2016		
Purpose of Expenditure Production Mailings		Category/ Type 004			
Name of Federal Candidate: SHEA-PORTER, CAROL, , ,			<input checked="" type="checkbox"/> Support Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate State: NH		
Calendar Year-To-Date Per Election for Office Sought 3229.50			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016		
Mailing Address 2120 L Street, NW, #305.			Amount 116.93		
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4809 Date of Disbursement or Obligation MM / DD / YYYY 10 / 28 / 2016		
Purpose of Expenditure Production Mailings		Category/ Type 004			
Name of Federal Candidate: KIHUEN, RUBEN, , ,			<input checked="" type="checkbox"/> Support Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV		
Calendar Year-To-Date Per Election for Office Sought 1077.34			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			0.00		
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u>		[Electronically Filed]		Date MM / DD / YYYY 12 / 07 / 2016	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 129 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Full Name of Payee THOMPSON RYER <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">740.69</div>		
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4820 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure Door Hangers		Category/ Type <div style="border: 1px solid black; padding: 2px;">004</div>	Name of Federal Candidate:		
CLINTON, HILLARY, RODHAM, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">375556.55</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ►		
Full Name of Payee THOMPSON RYER <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">106.44</div>		
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4821 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure Door Hangers		Category/ Type <div style="border: 1px solid black; padding: 2px;">004</div>	Name of Federal Candidate:		
HASSAN, MARGARET WOOD, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NH</u>		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">18590.23</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ►		
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>		
(a) SUBTOTAL of Unitemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
(a) TOTAL Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature HICKEY, BRIAN, E, Mr.,		[Electronically Filed]		Date <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div>	
<div style="border: 1px solid black; padding: 2px;">12</div>		<div style="border: 1px solid black; padding: 2px;">07</div>		<div style="border: 1px solid black; padding: 2px;">2016</div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on				<div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y / / / </div>	
Full Name of Payee THOMPSON RYER <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 31 / 2016 </div>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 106.44 </div>		
City Washington State DC Zip Code 20037		Transaction ID : SE.4823 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 31 / 2016 </div>			
Purpose of Expenditure Door Hangers		Category/Type 004		Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose DRISKELL, GRETCHEN, , ,	
Office Sought: <input checked="" type="checkbox"/> House District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MI		Calendar Year-To-Date Per Election for Office Sought 17094.40			
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶				Full Name of Payee THOMPSON RYER <input checked="" type="checkbox"/> Memo Item	
Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 11 / 01 / 2016 </div>				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 106.44 </div>	
Mailing Address 2120 L Street, NW, #305.				Transaction ID : SE.4835 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 11 / 01 / 2016 </div>	
City Washington State DC Zip Code 20037		Purpose of Expenditure Door Hangers			
Category/Type 004		Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose DRISKELL, GRETCHEN, , ,			
Office Sought: <input checked="" type="checkbox"/> House District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MI		Calendar Year-To-Date Per Election for Office Sought 19216.21			
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶				(a) SUBTOTAL of Itemized Independent Expenditures ▶ 0.00	
(a) SUBTOTAL of Unitemized Independent Expenditures ▶					
(a) TOTAL Independent Expenditures ▶					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
HICKEY, BRIAN, E, Mr., Signature			[Electronically Filed] Date 12 / 07 / 2016		

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on MM / DD / YYYY	

Full Name of Payee THOMPSON RYER		<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 01 / 2016	
Mailing Address 2120 L Street, NW, #305.				Amount 106.44	
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4836		
Purpose of Expenditure Door Hangers		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 11 / 01 / 2016		
Name of Federal Candidate: HASSAN, MARGARET WOOD, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NH	
Calendar Year-To-Date Per Election for Office Sought		20134.07		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee THOMPSON RYER		<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 01 / 2016	
Mailing Address 2120 L Street, NW, #305.				Amount 740.69	
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4837		
Purpose of Expenditure Door Hangers		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 11 / 01 / 2016		
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought		387100.06		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(a) SUBTOTAL of Unitemized Independent Expenditures	
(a) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

Signature

[Electronically Filed]

Date MM / DD / YYYY
12 / 07 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">106.44</div>		
City Washington State DC Zip Code 20037		Transaction ID : SE.4850 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>			
Purpose of Expenditure Door Hangers		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
Name of Federal Candidate: DRISKELL, GRETCHEN, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MI		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">21338.02</div>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">106.44</div>		
City Washington State DC Zip Code 20037		Transaction ID : SE.4851 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>			
Purpose of Expenditure Door Hangers		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
Name of Federal Candidate: HASSAN, MARGARET WOOD, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NH		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">21876.78</div>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶					
<div style="display: flex; justify-content: space-between;"> <div> (a) SUBTOTAL of Itemized Independent Expenditures (a) SUBTOTAL of Unitemized Independent Expenditures (a) TOTAL Independent Expenditures </div> <div style="text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
HICKEY, BRIAN, E, Mr., Signature			[Electronically Filed] Date <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>		

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 133 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on				<div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y / / / </div>	

Full Name of Payee THOMPSON RYER			<input checked="" type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 11 / 02 / 2016 </div>	
Mailing Address 2120 L Street, NW, #305.				
City Washington	State DC	Zip Code 20037	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 740.69 </div>	
Purpose of Expenditure Door Hangers		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Transaction ID : SE.4852 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 11 / 02 / 2016 </div>	
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,			<input checked="" type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">403508.20</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee THOMPSON RYER			<input checked="" type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 11 / 03 / 2016 </div>	
Mailing Address 2120 L Street, NW, #305.				
City Washington	State DC	Zip Code 20037	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 106.44 </div>	
Purpose of Expenditure Door Hangers		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Transaction ID : SE.4864 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 11 / 03 / 2016 </div>	
Name of Federal Candidate: DRISKELL, GRETCHEN, ,			<input checked="" type="checkbox"/> Support Office Sought: <input checked="" type="checkbox"/> House District: <u>07</u> <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>MI</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">23459.83</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(a) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

Signature

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 12 / 07 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 134 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS		FEC IDENTIFICATION NUMBER ▼ C C00624817	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee THOMPSON RYER <input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 03 / 2016	
Mailing Address 2120 L Street, NW, #305.		Amount 106.44	
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4865
Purpose of Expenditure Door Hangers		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 11 / 03 / 2016
Name of Federal Candidate: HASSAN, MARGARET WOOD, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NH
Calendar Year-To-Date Per Election for Office Sought 23355.32		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee THOMPSON RYER <input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 03 / 2016	
Mailing Address 2120 L Street, NW, #305.		Amount 740.69	
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4866
Purpose of Expenditure Door Hangers		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 11 / 03 / 2016
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 414051.74		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(a) SUBTOTAL of Unitemized Independent Expenditures			
(a) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature HICKEY, BRIAN, E, Mr.,		Date M M / D D / Y Y Y Y Y Y 12 / 07 / 2016	
[Electronically Filed]			

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 135 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">11</div> <div style="border: 1px solid black; padding: 2px;">04</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Mailing Address 2120 L Street, NW, #305.				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">106.44</div>	
City Washington		State DC		Zip Code 20037	
Purpose of Expenditure Door Hangers				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: DRISKELL, GRETCHEN, , ,				Office Sought: <input checked="" type="checkbox"/> House District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MI	
Calendar Year-To-Date Per Election for Office Sought				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; text-align: right;">23566.27</div>					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">11</div> <div style="border: 1px solid black; padding: 2px;">04</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Mailing Address 2120 L Street, NW, #305.				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">106.44</div>	
City Washington		State DC		Zip Code 20037	
Purpose of Expenditure Door Hangers				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: HASSAN, MARGARET WOOD, , ,				Office Sought: <input type="checkbox"/> House District: <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NH	
Calendar Year-To-Date Per Election for Office Sought				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; text-align: right;">23461.76</div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (a) SUBTOTAL of Itemized Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (a) SUBTOTAL of Unitemized Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (a) TOTAL Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u>				Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">12</div> <div style="border: 1px solid black; padding: 2px;">07</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 136 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <input type="text"/>	

Full Name of Payee THOMPSON RYER		<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"><div><input type="text"/>11<input type="text"/></div><div><input type="text"/>04<input type="text"/></div><div><input type="text"/>2016<input type="text"/></div></div>	
Mailing Address 2120 L Street, NW, #305.				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">740.69</div>	
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4869		
Purpose of Expenditure Door Hangers		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"><div><input type="text"/>11<input type="text"/></div><div><input type="text"/>04<input type="text"/></div><div><input type="text"/>2016<input type="text"/></div></div>		
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">418140.89</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee THOMPSON RYER		<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"><div><input type="text"/>11<input type="text"/></div><div><input type="text"/>06<input type="text"/></div><div><input type="text"/>2016<input type="text"/></div></div>	
Mailing Address 2120 L Street, NW, #305.				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">740.67</div>	
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4898		
Purpose of Expenditure Door Hangers		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"><div><input type="text"/>11<input type="text"/></div><div><input type="text"/>06<input type="text"/></div><div><input type="text"/>2016<input type="text"/></div></div>		
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">457050.86</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(a) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

Signature

[Electronically Filed]

Date

12

07

2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 137 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report <input type="checkbox"/> Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>	

Full Name of Payee THOMPSON RYER			<input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination		
Mailing Address 2120 L Street, NW, #305.						<div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 11 / 06 / 2016 </div>		
City Washington		State DC		Zip Code 20037		Amount		
Purpose of Expenditure Door Hangers		Category/ Type		<div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		<div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 11 / 06 / 2016 </div>		
Name of Federal Candidate: HASSAN, MARGARET WOOD, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▶		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">26312.40</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee THOMPSON RYER			<input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination		
Mailing Address 2120 L Street, NW, #305.						<div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 11 / 06 / 2016 </div>		
City Washington		State DC		Zip Code 20037		Amount		
Purpose of Expenditure Door Hangers		Category/ Type		<div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		<div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 11 / 06 / 2016 </div>		
Name of Federal Candidate: DRISKELL, GRETCHEN, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▶		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">27703.45</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>	
(a) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
(a) TOTAL Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

Signature

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 12 / 07 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 138 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <div style="float: right;"> New report <input type="checkbox"/> Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div> </div>					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 11 / 07 / 2016 </div>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 106.44 </div>		
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4930 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 11 / 07 / 2016 </div>		
Purpose of Expenditure Door Hangers		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>			
Name of Federal Candidate: DRISKELL, GRETCHEN, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 07 State: MI		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">29825.26</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 11 / 07 / 2016 </div>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 106.44 </div>		
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4931 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 11 / 07 / 2016 </div>		
Purpose of Expenditure Door Hangers		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>			
Name of Federal Candidate: HASSAN, MARGARET WOOD, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: State: NH		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">27790.94</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>		
(a) SUBTOTAL of Unitemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>		
(a) TOTAL Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature HICKEY, BRIAN, E, Mr.,		[Electronically Filed]		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 12 / 07 / 2016 </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 139 OF 139
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>				
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>	
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">740.67</div>	
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4932 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>	
Purpose of Expenditure Door Hangers		Category/ Type <div style="border: 1px solid black; padding: 2px;">004</div>	<div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>	
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">474006.88</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ► _____	
Full Name of Payee <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>	
Mailing Address			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>	
City	State	Zip Code	Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>	
Purpose of Expenditure		Category/ Type <div style="border: 1px solid black; padding: 2px;"> </div>	<div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>	
Name of Federal Candidate:			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ► _____	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; text-align: right;">268559.87</div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

Signature

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y Y